Fill in this information to ic	Page 1 Page 1 Page 1	of 56
United States Bankruptcy Co	ourt for the:	R I I
Northern District of Illinois		UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS
Case number (If known):	Chapter you are filing under	. NORTHERN DISTRICT OF ILLINOIS
Odde (fathbet (fr.filowii):	☑ Chapter 7	APR 12 2016
	☐ Chapter 11 ☐ Chapter 12	
	Chapter 13	JEFFREY P. ALLS Check if this is an amended ONERK
Official Form 101		
Voluntary Pe	tition for Individuals Fili	ng for Bankruptcy 12/15
same person must be Debtor Be as complete and accurate	een them. In joint cases, one of the spouses must report in all of the forms. as possible. If two married people are filing together, be needed, attach a separate sheet to this form. On the tor	out the spouses separately, the form uses <i>Debtor 1</i> and t information as <i>Debtor 1</i> and the other as <i>Debtor 2</i> . The oth are equally responsible for supplying correct of any additional pages, write your name and case number
Part 1: Identify Yoursel		
Your full name	About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
Write the name that is on your government-issued picture identification (for example, your driver's license or passport).	Marcus First name	
	riist tame	First name
	Middle name	Middle name
Bring your picture identification to your meetin	Morris Last name	Last name
with the trustee.		Last Heline
	Suffix (Sr., Jr., II, III)	Suffix (Sr., Jr., II, III)
2. All other names you		
have used in the last 8 years	First name	First name
Include your married or maiden names.	Middle name	Middle name
	Last name	Last name
	First name	First name
	Middle name	Middle name
	Last name	Last name
o Only the least & allelis s		
 Only the last 4 digits of your Social Security 	$xxx - xx - \underline{0} \underline{3} \underline{2} \underline{2}$	xxx - xx
number or federal Individual Taxpayer	OR	OR —
Identification number (ITIN)	9 xx - xx	9 xx - xx

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. 0	~	Document
Morcus	Dan	Maris
First Name	Mindia Norma	1 1 2 5 1 5 3

Case number (if known)_____

	About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
4. Any business names and Employer Identification Numbers (EIN) you have used in	☑ I have not used any business names or EINs.	☐ I have not used any business names or EINs.
the last 8 years	Business name	Business name
Include trade names and doing business as names	Business name	Business name
	EIN	EIN
	EIN	EIN
. Where you live		If Debtor 2 lives at a different address:
	4627 Farmington Ave Number Street	Number Street
	Richton Park, IL 60471 City State ZIP Code	City State ZIP Code
	COU/C County	County
	If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.
	Number Street	Number Street
	P.O. Box	P.O. Box
	City State ZIP Code	City State ZIP Code
Why you are choosing this district to file for	Check one:	Check one:
bankruptcy	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.
	I have another reason. Explain. (See 28 U.S.C. § 1408.)	t have another reason. Explain. (See 28 U.S.C. § 1408.)

Case 16-12398 Doc 1 Filed 04/12/16 Entered 04/12/16 11:51:45 Desc Main Page 3 of 56 Document Deptor 1 Case number (itenowe) Part 2: **Tell the Court About Your Bankruptcy Case** 7. The chapter of the Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing Bankruptcy Code you for Bankruptcy (Form 2010)). Also, go to the top of page 1 and check the appropriate box. are choosing to file ☑ Chapter 7 under ☐ Chapter 11 Chapter 12 Chapter 13 8. How you will pay the fee ☐ I will pay the entire fee when I file my petition. Please check with the clerk's office in your local court for more details about how you may pay. Typically, if you are paying the fee yourself, you may pay with cash, cashier's check, or money order. If your attorney is submitting your payment on your behalf, your attorney may pay with a credit card or check with a pre-printed address. I need to pay the fee in installments. If you choose this option, sign and attach the Application for Individuals to Pay The Filing Fee in Installments (Official Form 103A). ☑ I request that my fee be waived (You may request this option only if you are filing for Chapter 7. By law, a judge may, but is not required to, waive your fee, and may do so only if your income is less than 150% of the official poverty line that applies to your family size and you are unable to pay the fee in installments). If you choose this option, you must fill out the Application to Have the Chapter 7 Filing Fee Waived (Official Form 103B) and file it with your petition. Have you filed for Z No bankruptcy within the Yes. District _____ last 8 years? MM / DD / YYYY District When Case number MM / DD / YYYY 10. Are any bankruptcy Z No cases pending or being Yes. filed by a spouse who is Relationship to you not filing this case with When Case number, if known_ you, or by a business MM / DD / YYYY partner, or by an affiliate? Debtor Relationship to you When Case number, if known____ MM / DD / YYYY

11. Do you rent your residence?

No. Go to line

Yes. Has your landlord obtained an eviction judgment against you and do you want to stay in your residence?

No. Go to line 12.

Yes. Fill out *Initial Statement About an Eviction Judgment Against You* (Form 101A) and file it with this bankruptcy petition.

me	Last Name		ase number (if known)	
Busines	ses You Own as a S	ole Proprietor			
☑ No.	Go to Part 4.				
☐ Yes	. Name and location of b	ousiness			
	Name of business, if any				
	Number Street			1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -	
		Andrew State Control of the Control	******		
	City	Principle Control Cont	State	ZIP Code	
	Check the appropriate	hay ta dagariha unur hunin			
		- '	• •		
		(a	101(0)/		
most re	<i>appropriate deadlines.</i> If cent balance sheet, state	you indicate that you are a ement of operations, cash-	a small business flow statement a	debtor, you must attach your	
🗹 No.	I am not filing under Cha	apter 11.			
□ No.	 I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy Code. 				
Yes.	I am filing under Chapte Bankruptcy Code.	r 11 and I am a small busi	ness debtor acco	ording to the definition in the	
r Have	Any Hazardous Prop	erty or Any Property	That Needs Ir	nmediate Attention	
[7] No.					
	SAM at 2 at a t				
will Yes.	What is the hazard?				
	If immediate attention is	s needed, why is it needed	12		
	If immediate attention is	s needed, why is it needed	1?		
	If immediate attention is	s needed, why is it needed	1?		
		s needed, why is it needed	1?		
	If immediate attention is Where is the property?	s needed, why is it needed	1?		
			1?		
			!?		
	If you as can set most reany of the No. No. Yes. Yes.	No. Go to Part 4. Yes. Name and location of the Name of business, if any Number Street City Check the appropriate of the Health Care Busine of Single Asset Real Englished Stockbroker (as defined in Commodity Broker of the Above of these documents do not englished in No. I am not filing under Chapter the Bankruptcy Code. Yes. I am filing under Chapter Bankruptcy Code.	Name of business, if any Number Street City Check the appropriate box to describe your busin Health Care Business (as defined in 11 U.S.C. Single Asset Real Estate (as defined in 11 U.S.C. § 101(53) Commodity Broker (as defined in 11 U.S.C. § None of the above If you are filing under Chapter 11, the court must know who can set appropriate deadlines. If you indicate that you are most recent balance sheet, statement of operations, cashany of these documents do not exist, follow the procedure No. I am not filing under Chapter 11. No. I am filing under Chapter 11, but I am NOT a small the Bankruptcy Code. Yes. I am filing under Chapter 11 and I am a small busi Bankruptcy Code. The Have Any Hazardous Property or Any Property	Name of business, if any Number Street City State Check the appropriate box to describe your business: ☐ Health Care Business (as defined in 11 U.S.C. § 101(27A)) ☐ Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B)) ☐ Stockbroker (as defined in 11 U.S.C. § 101(63A)) ☐ Commodity Broker (as defined in 11 U.S.C. § 101(6)) ☐ None of the above If you are filing under Chapter 11, the court must know whether you are a scan set appropriate deadlines. If you indicate that you are a small business most recent balance sheet, statement of operations, cash-flow statement, a any of these documents do not exist, follow the procedure in 11 U.S.C. § 11 No. I am not filing under Chapter 11. ☐ No. I am filing under Chapter 11, but I am NOT a small business debto the Bankruptcy Code. ☐ Yes. I am filing under Chapter 11 and I am a small business debtor according to the second of the	

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Desc Main

Debtor 1

First Name Middle Name Let Name

Case number (if known)_____

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

 Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

l am	not	required	to	receive	а	briefing	about
		unseling					

I have a mental illness or a mental deficiency that makes me

incapable of realizing or making rational decisions about finances.

Disability. My physical disability causes me to be unable to participate in a

to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

Ш	I am not required t	o receive a	briefing	abou
	credit counseling	because of	: ~	

I have a mental illness or a mental deficiency that makes me

incapable of realizing or making rational decisions about finances.

Disability. My physical disability causes me to be unable to participate in a

briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

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Debtor 1

	Δ.	וסט	Junie
Marca	is Dan	Morris	
First Name	Middle Name	Last Name	

Case number (#known)___

			oses			
16.	. What kind of debts do you have?	16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."				
		☐ No. Go to line 16b. ☐ Yes. Go to line 17.				
		16b. Are your debts prima money for a business or	arily business debts? Business debts investment or through the operation of the	s are debts that you incurred to obtain e business or investment.		
		No. Go to line 16c. Yes. Go to line 17.				
		16c. State the type of debts ye	ou owe that are not consumer debts or bu	usiness debts.		
17.	Are you filing under Chapter 7?	☐ No. I am not filing under (Chapter 7. Go to line 18.			
	Do you estimate that after any exempt property is	Yes. I am filing under Char	oter 7. Do you estimate that after any exe ses are paid that funds will be available to	mpt property is excluded and odistribute to unsecured creditors?		
	excluded and	☑ No		distribute to discoursed distributes;		
	administrative expenses are paid that funds will be available for distribution to unsecured creditors?	Yes				
18.	How many creditors do	2 1-49	1,000-5,000	25,001-50,000		
	you estimate that you	50-99	5,001-10,000	50,001-100,000		
	owe?	☐ 100-199 ☐ 200-999	10,001-25,000	☐ More than 100,000		
	How much do you	2 \$0-\$50,000	☐ \$1,000,001-\$10 million	□ \$500,000,001-\$1 billion		
	estimate your assets to be worth?	\$50,001-\$100,000	□ \$10,000,001-\$50 million	☐ \$1,000,000,001-\$10 billion		
	be worth:	\$100,001-\$500,000 \$500,001-\$1 million	\$50,000,001-\$100 million \$100,000,001-\$500 million	☐ \$10,000,000,001-\$50 billion☐ More than \$50 billion		
	How much do you	\$0-\$50,000	□ \$1,000,001-\$10 million	□ \$500,000,001-\$1 billion		
	estimate your liabilities to be?	\$50,001-\$100,000	□ \$10,000,001-\$50 million	□ \$1,000,000,001-\$10 billion		
	io oe:	\$100,001-\$500,000	\$50,000,001-\$100 million	\$10,000,000,001-\$50 billion		
Pai	1.7: Sign Below	□ \$500,001-\$1 million	\$100,000,001-\$500 million	☐ More than \$50 billion		
For	ryou	I have examined this petition, a correct.	ind I declare under penalty of perjury that	the information provided is true and		
		If I have chosen to file under CI of title 11, United States Code. under Chapter 7.	hapter 7, I am aware that I may proceed, I understand the relief available under ea	if eligible, under Chapter 7, 11,12, or 13 ch chapter, and I choose to proceed		
		If no attorney represents me an this document, I have obtained	ld I did not pay or agree to pay someone and read the notice required by 11 U.S.C	who is not an attorney to help me fill out . § 342(b).		
		I request relief in accordance w	ith the chapter of title 11, United States C	ode, specified in this petition.		
		I understand making a false sta with a bankruptcy case can resi 18 U.S.C. §§ 152, 1341, 1519,	ult in fines up to \$250,000, or imprisonme	money or property by fraud in connection in for up to 20 years, or both.		
		* Mon	Upe x_			
		Signature of Debtor 1		e of Debtor 2		
		Executed on 4 / 17 / 1	2016 Executed	on		

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Debtor 1

Marcus Don Morric

Case number (if known)_____

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

	Date	
Signature of Attorney for Debtor		MM / DD /YYYY
Printed name		
Firm name		
Number Street		
City	State	ZIP Code
Contact phone	Email address	s
Bar number	State	-

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Desc Main

Debtor 1

Marcus Don Morris

Case number (if known)

For you if you are filing this bankruptcy without an attorney

If you are represented by an attorney, you do not need to file this page. The law allows you, as an individual, to represent yourself in bankruptcy court, but you should understand that many people find it extremely difficult to represent themselves successfully. Because bankruptcy has long-term financial and legal consequences, you are strongly urged to hire a qualified attorney.

To be successful, you must correctly file and handle your bankruptcy case. The rules are very technical, and a mistake or inaction may affect your rights. For example, your case may be dismissed because you did not file a required document, pay a fee on time, attend a meeting or hearing, or cooperate with the court, case trustee, U.S. trustee, bankruptcy administrator, or audit firm if your case is selected for audit. If that happens, you could lose your right to file another case, or you may lose protections, including the benefit of the automatic stay.

You must list all your property and debts in the schedules that you are required to file with the court. Even if you plan to pay a particular debt outside of your bankruptcy, you must list that debt in your schedules. If you do not list a debt, the debt may not be discharged. If you do not list property or properly claim it as exempt, you may not be able to keep the property. The judge can also deny you a discharge of all your debts if you do something dishonest in your bankruptcy case, such as destroying or hiding property, falsifying records, or lying. Individual bankruptcy cases are randomly audited to determine if debtors have been accurate, truthful, and complete. Bankruptcy fraud is a serious crime; you could be fined and imprisoned.

If you decide to file without an attorney, the court expects you to follow the rules as if you had hired an attorney. The court will not treat you differently because you are filing for yourself. To be successful, you must be familiar with the United States Bankruptcy Code, the Federal Rules of Bankruptcy Procedure, and the local rules of the court in which your case is filed. You must also be familiar with any state exemption laws that apply.

Are you aware that filing for bankruptcy is a serious consequences?	action with long-term financial and legal
☐ No ☑ Yes	
Are you aware that bankruptcy fraud is a serious or inaccurate or incomplete, you could be fined or imp No	, ,
☑ Yes	
Did you pay or agree to pay someone who is not ar No	attorney to help you fill out your bankruptcy forms?
☐ Yes. Name of Person	
Attach Bankruptcy Petition Preparer's Notice,	Declaration, and Signature (Official Form 119).
By signing here, I acknowledge that I understand the have read and understood this notice, and I am award attorney may cause me to lose my rights or propertion. Signature of Debtor 1	are that filing a bankruptcy case without an
•	Signature of Debior 2
Date 4 /2 2016 MM / DD / YYYY	Date MM / DD / YYYY
Contact phone	Contact phone
Cell phone (773) 690-8765	Cell phone
Email address Babydon82@gmail.com	Email address

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Fill	in this in	formation to id	entify your case:				
Debt	or 1	Marcus		Morris			
		First Name	Middle Name	Last Name			
Debt (Spor	or 2 use, if filing)	First Name	Middle Name	Last Name			
Unite	ed States I	Bankruptcy Court f	or the: Northern District	of Illinois			
Case	number					☐ Check if this i	s an
<u></u>		(If known)				amended filin	
Offi	cial F	orm 106	Sum				
		***************************************		l iahilities and (Certain Statistical Info		
					ether, both are equally responsible for		5
intorn	nation. F	ill out all of you	ur schedules first; then	complete the information	on this form, If you are filing amende	supplying correct d schedules after you file	9
your c	original t	orms, you mus	t fill out a new <i>Summa</i>	ry and check the box at th	e top of this page.		
Part	1: Su	mmarize You	r Assets				
							······································
						Your assets	
1. Sci	hedule A	/B: Property (Of	ficial Form 106A/B)			Value of what you own	
				/B	***************************************	\$	0
					•		
1b.	Copy lin	e 62, Total pers	onal property, from Sche	edule A/B		\$3,700.00	2
1c.	Copy line	e 63. Total of all	property on Schedule A	√P.]
			proporty on conductory			\$3,700.00	2
Part 2	2 6	mmarize You	- 1				
rait	30	mmarize rou	Liablifiles				
						Your liabilities Amount you owe	
				y Property (Official Form 106		·	
2a.	Copy the	e total you listed	in Column A, Amount of	claim, at the bottom of the	last page of Part 1 of Schedule D	\$0.00)
3. Sch	nedule E/	F: Creditors Wh	o Have Unsecured Clain	ns (Official Form 106E/F)			
3a.	Copy the	total claims fro	m Part 1 (priority unsecu	red claims) from line 6e of 8	Schedule E/F	\$	<u>)</u>
3b.	Copy the	total claims fro	m Part 2 (nonpriority uns	secured claims) from line 6j	of Schedule E/F	. 11 100 00	١
						+ \$ 11,100.00	<u>,</u>
					Your total liabilities	s 11,100.00	7
					, our tout naomitou	<u> </u>	
Part 3	: Sur	nmarize Your	Income and Expen	ses			
							······································
			ficial Form 106l)			s 0.00	İ
Cop	y your c	ombined monthl	y income from line 12 of	Schedule I		\$0.00	•
			(Official Form 106J)			200	
Cop	y your m	nonthly expense:	s from line 22c of Sched	ule J		\$680.00	<u>'</u>

Entered 04/12/16 11:51:45 Case 16-12398 Doc 1 Filed 04/12/16 Desc Main Document Page 10 of 56 Marcus Morris Debtor 1 Case number (if known) First Name Middle Name **Answer These Questions for Administrative and Statistical Records** Part 4: 6. Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules. ☑ Yes 7. What kind of debt do you have? Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159. Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules. 8. From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14. 0.00 9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F: Total claim From Part 4 on Schedule E/F, copy the following: 0.00 9a. Domestic support obligations (Copy line 6a.)

9b. Taxes and certain other debts you owe the government. (Copy line 6b.)

9d. Student loans. (Copy line 6f.)

priority claims. (Copy line 6g.)

9g. Total. Add lines 9a through 9f.

9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)

9e. Obligations arising out of a separation agreement or divorce that you did not report as

9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)

0.00

0.00

0.00

0.00

0.00

0.00

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Document Fill in this information to identify your case and this filing: Marcus Morris Debtor 1 First Name Middle Name Last Name Debtor 2 (Spouse, if filing) First Name Middle Name United States Bankruptcy Court for the: Northern District of Illinois

Check if this is an amended filing

Official Form 106A/B

Schedule A/B: Property

12/15

In each category, separately list and describe items. List an asset only once. If an asset fits in more than one category, list the asset in the category where you think it fits best. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

, ,	ou own or have any legal or equitable intere	st in any residence, building, land, or similar prop	erty?	
ň	No. Go to Part 2.		-	
١	es. Where is the property?			
1.1.	Street address, if available, or other description	What is the property? Check all that apply. Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land	Do not deduct secured climber amount of any secure Creditors Who Have Clair Current value of the entire property?	d claims on Schedule D: ms Secured by Property.
		☐ Investment property	φ	3
	City State ZIP Code	Timeshare Other	Describe the nature of interest (such as fee the entireties, or a life	simple, tenancy by
		Who has an interest in the property? Check one.		
		Debtor 1 only		
	County	☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	Check if this is co	mmunity property
2.	own or have more than one, list here:	What is the property? Check all that apply. Single-family home	Do not deduct secured cla the amount of any secured Creditors Who Have Clain	I claims on Schedule D:
	Street address, if available, or other description	Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home	Current value of the entire property?	
		Land Investment property	\$	\$
	City State ZIP Code	Timeshare Other	Describe the nature of interest (such as fee state the entireties, or a life	simple, tenancy by
		Who has an interest in the property? Check one.		
		Debtor 1 only		
	County	Debtor 2 only		
	•	Debtor 1 and Debtor 2 only	Check if this is cor	nmunity property
		At least one of the debtors and another	(see instructions)	
		At least one of the deptors and another	(CCC MOREQUEOTIS)	

1.3.	Street address, if available, or other description	What is the property? Check all that apply. Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home	Do not deduct secured clathe amount of any secure Creditors Who Have Clair Current value of the entire property?	d claims on Schedule D:
	City State ZIP Code	Land Investment property Timeshare Other	Describe the nature of interest (such as fee the entireties, or a life	simple, tenancy by
	County	Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Other information you wish to add about this its property identification number:	Check if this is co (see instructions) em, such as local	emmunity property
rt 2:	Describe Your Vehicles			
own	that someone else drives. If you lease a vehicle	st in any vehicles, whether they are registered or e, also report it on Schedule G: Executory Contracts		s
Cars	that someone else drives. If you lease a vehicle, vans, trucks, tractors, sport utility vehicles	e, also report it on Schedule G: Executory Contracts		s
Cars	that someone else drives. If you lease a vehicle, vans, trucks, tractors, sport utility vehicles	e, also report it on Schedule G: Executory Contracts		aims or exemptions. Put d claims on Schedule D: ns Secured by Property. Current value of the portion you own?
Cars	that someone else drives. If you lease a vehicle vans, trucks, tractors, sport utility vehicles to established a second vese make: Make: Model: Year: Approximate mileage:	e, also report it on Schedule G: Executory Contracts in motorcycles Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see	Do not deduct secured class the amount of any secure Creditors Who Have Clair. Current value of the entire property?	aims or exemptions. Put d claims on Schedule D: ns Secured by Property. Current value of the portion you own?
Cars	that someone else drives. If you lease a vehicle vans, trucks, tractors, sport utility vehicles to res Make: Model: Year: Approximate mileage: Other information:	e, also report it on Schedule G: Executory Contracts in motorcycles Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see	Do not deduct secured class the amount of any secure Creditors Who Have Clair. Current value of the entire property?	aims or exemptions. Put d claims on Schedule D: ns Secured by Property. Current value of the portion you own? \$

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Debtor 1

Debtor 1	Marcus	oc 1 Filed 04/12/16 Entered 04/12/16 ————————————————————————————————————		Main
	First Name Middle Name	Last Name Document 1 age 10 01 00		
3,3.	Make:	Who has an interest in the property? Check one.	Do not deduct secured cla	aims or exemptions. Put
	Model:	Debtor 1 only	the amount of any secure Creditors Who Have Clair	d claims on Schedule D:
	Year:	Debtor 2 only		
	***************************************	Debtor 1 and Debtor 2 only	Current value of the entire property?	Current value of the portion you own?
	Approximate mileage:	At least one of the debtors and another	entile property:	portion you own?
	Other information:	_	•	•
		☐ Check if this is community property (see instructions)	\$	\$
3.4.	Make:	Who has an interest in the property? Check one.	Do not deduct secured cla	
	Model:	Debtor 1 only	the amount of any secure Creditors Who Have Clair	
	4-4-4-4-4-4-4-4-4-4-4-4-4-4-4-4-4-4-4-	Debtor 2 only	Orealions who have chair	ilis Secured by Property.
	Year:	Debtor 1 and Debtor 2 only	Current value of the	Current value of the
	Approximate mileage:	At least one of the debtors and another	entire property?	portion you own?
	Other information:			
		Check if this is community property (see instructions)	\$	\$
☐ N	lo	watercraft, fishing vessels, snowmobiles, motorcycle accesso	nes	
4.1.	Make:	Who has an interest in the property? Check one.	Do not deduct secured cla	nims or exemptions. Put
7.1.		Debtor 1 only	the amount of any secure	d claims on Schedule D:
		Debtor 2 only	Creditors Who Have Clain	ns Securea by Property.
	Year:	Debtor 1 and Debtor 2 only	Current value of the	Current value of the
	Other information:	At least one of the debtors and another	entire property?	portion you own?
		☐ Check if this is community property (see instructions)	\$	\$
If you	own or have more than one, list here:			
4.3	Make:	Who has an interest in the property? Check one.	Do not deduct secured cla	ims or exemptions. But
4.2.		Debtor 1 only	the amount of any secure	d claims on Schedule D:
	Model:	Debtor 2 only	Creditors Who Have Clain	ns Secured by Property.
	Year:	Debtor 1 and Debtor 2 only	Current value of the	
	Other information:	At least one of the debtors and another	entire property?	portion you own?
		Check if this is community property (see instructions)	\$	\$

Add the dollar value of the portion you own for all of your entries from Part 2, including any entries for pages you have attached for Part 2. Write that number here

Case 16-12398 Doc 1 Filed 04/12/16 Entered 04/12/16 11:51:45 Desc Main First Name Middle Name Last Name Document Page 14 6fs 56 mber (if known)

Part 3: Describe Your Personal and Household Items

De	you own or have any legal or equitable interest in any of the following items?	Current value of the portion you own? Do not deduct secured claims or exemptions.
6.	Household goods and furnishings	•
	Examples: Major appliances, furniture, linens, china, kitchenware	
	□ No	
	☑ Yes. Describe Furniture	\$ 1,600.00
		Y
7.	Electronics	
	Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games	
	□ No □	
	Yes. Describe Television, cell phone and audio	\$1,600.00
8	Collectibles of value	
Ο.		
	Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles No	
	Yes. Describe	•
		\$
9.	Equipment for sports and hobbies	
	Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments	
	No No	
	Yes. Describe	\$
		Y
	Firearms	
	Examples: Pistols, rifles, shotguns, ammunition, and related equipment No	
	Yes. Describe	
	— 130. D0001100	\$
11.	Clothes	
	Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories	
	□ No	
	Yes. Describe Clothes and shoes	\$ 500.00
		*
2.,	Jewelry	
	Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver	
	☑ No	
	Yes. Describe	\$
3 1	Non-farm animals	
	Examples: Dogs, cats, birds, horses	
	2 No	
	Yes. Describe	
	- FOR DOUGLOSSING	\$
4 1	Any other personal and household items you did not already list, including any health aids you did not list	
١	☑ No	
	Yes. Give specific	
	information,	\$
5. /	Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached	
f	or Part 3. Write that number here	s3,700.00

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Part 4:

Describe Your Financial Assets

Do you own or have as	ny legal or equitable interest in	any of the following?		Current value of the portion you own? Do not deduct secured claims or exemptions.
16. Cash Examples: Money yo	ou have in your wallet, in your hon	ne, in a safe deposit box, and on hand when you file	e your petition	
☑ No				
☐ Yes			Cash:	\$
and other	, savings, or other financial accoເ similar institutions. If you have m	nts; certificates of deposit; shares in credit unions, ultiple accounts with the same institution, list each.	brokerage houses,	
☑ No ☐ Yes		1 77 0		
165		Institution name:		
	17.1. Checking account:			\$
	17.2. Checking account:			\$
	17.3. Savings account:			•
	17.4. Savings account:			9
	17.5. Certificates of deposit:			3
	17.6. Other financial account:			\$
				\$
	17.7. Other financial account:			\$
	17.8. Other financial account:			\$
	17.9. Other financial account:			\$
	s, or publicly traded stocks s, investment accounts with broke	rage firms, money market accounts		
☑ No				
1 Yes	Institution or issuer name:			
		Andrew Control of the		\$
				\$
				\$
19. Non-publicly traded an LLC, partnership,	stock and interests in incorpor and joint venture	ated and unincorporated businesses, including	an interest in	
☑ No	Name of entity:		of ownership:	
Yes. Give specific information about)% %	\$
them)% %	\$
			<u>%</u>	\$

Case 16-12398	Do

\$

20. Government and	cornorate bonds and o	other negotiable and non-negotiable instruments					
Negotiable instrun	nents include personal cl	include personal checks, cashiers' checks, promissory notes, and money orders. ents are those you cannot transfer to someone by signing or delivering them.					
☑ No ☐ Yes. Give spec	cific Issuer name:						
information about	out		\$				
			\$				
	***************************************		\$				
21. Retirement or per							
Examples: Interest	ts in IRA, ERISA, Keogh,	401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans					
Yes. List each							
account separa	ately. Type of account:	Institution name:					
	401(k) or similar pla	n:	\$				
	Pension plan:		\$				
	IRA:		\$				
	Retirement account		\$				
	Keogh:		\$				
	Additional account:						
			\$				
	Additional account:		\$				
	nused deposits you have nents with landlords, prep	made so that you may continue service or use from a company aid rent, public utilities (electric, gas, water), telecommunications					
☑ No							
☐ Yes		institution name or individual:					
	Electric:		\$				
	Gas:		\$				
	Heating oil:		\$				
	Security deposit on a	rental unit:	\$				
	Prepaid rent:		\$				
	Telephone:		\$				
	Water:		\$				
	Rented furniture:		\$				
	Other:		\$				
4							
23. Annuities (A contra	act for a periodic paymen	t of money to you, either for life or for a number of years)					
☐ Yes	Issuer name and de	escription:					
			\$				
			\$				

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24. Interests in an education in 26 U.S.C. §§ 530(b)(1), 529/	RA, in an account in a qualified ABLE progra A(b), and 529(b)(1).	m, or under a qualified state tuition program	1.
☑ No			
☐ Yes	Institution name and description. Separately	file the records of any interests.11 U.S.C. § 52	1(c):
			_ \$
			\$
			-
			–
5. Trusts, equitable or future i exercisable for your benefi	nterests in property (other than anything list t	ted in line 1), and rights or powers	
No No			
Yes. Give specific information about them			\$
6. Patents, copyrights, traden	narks, trade secrets, and other intellectual pr ames, websites, proceeds from royalties and lic	roperty	
☑ No	and, woodies, proceeds norn royalies and no	crising agreements	
☐ Yes. Give specific information about them			\$
7. Licenses, franchises, and o			
	exclusive licenses, cooperative association hold	ings, liquor licenses, professional licenses	
2 No			
Yes. Give specific information about them			\$
loney or property owed to you	1?		Current value of the portion you own? Do not deduct secured claims or exemptions.
. Tax refunds owed to you			
☑ No			
☐ Yes. Give specific informa	ition		
about them, including	g whether	Federal:	\$
you already filed the and the tax years		State:	\$
,		Local:	\$
. Family support			
• • •	sum alimony, spousal support, child support, ma	intenance, divorce settlement, property settlem	ent
Yes. Give specific informa	tion		
,		Alimony:	\$
		Maintenance:	\$
		Support:	\$
		Divorce settlement:	\$
		Property settlement:	\$
Other amounts someone ow Examples: Unpaid wages, dis- Social Security ber	ves you ability insurance payments, disability benefits, s nefits; unpaid loans you made to someone else	ick pay, vacation pay, workers' compensation,	
No Social Security ber	roma, unpara roans you made to someone else		
Yes. Give specific information	tion		
- res. Give specific information	#UII		•

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	n insurance policies Health, disability, or life insurar	oce: health savings account (HSA).	credit, homeowner's, or renter's insurance	
☑ No	ricatin, disability, or life insurat	ice, health savings account (HSA),	credit, nomeowners, or renters insurance	
Yes. Na	ame the insurance company each policy and list its value	Company name:	Beneficiary:	Surrender or refund value;
				\$
				\$
				\$
22 Any Intone	né in managado ébaé in dos cosc			Ψ
If you are the property be		from someone who has died expect proceeds from a life insurance	e policy, or are currently entitled to receive	
Ø No				
∟i Yes. Gi	ve specific information			\$
				Ψ
Examples:		r not you have filed a lawsuit or m es, insurance claims, or rights to sue	· •	
☑ No				
☐ Yes. De	scribe each claim.			¢.
24 Othor conti	nant and unliquidated alaim		nterclaims of the debtor and rights	Ψ
to set off c	laims	is of every nature, including cour	nterclaims of the debtor and rights	
Z No				
Yes. De	scribe each claim			
				\$
35. Any financi	al assets you did not already	list		
No				
Yes. Gir	ve specific information			\$
				7
		s from Part 4, including any entri		
for Part 4. \	Nrite that number here		→	\$0.00
				-
Part 5: Do	escribe Any Business-l	Related Property You Owr	or Have an Interest In. List any r	eal estate in Part 1.
27 Do vou ou		ole interest in any business-relate	1	
	·	le interest in any business-relate	d property?	
No. Got				
□ res. Go	10 line 36.			
				Current value of the portion you own?
				Do not deduct secured claims or exemptions.
38. Accounts re	eceivable or commissions yo	u already earned		
2 No	•	·		
Yes. De	scribe			
				\$
39. Office equi	pment, furnishings, and supp	olies		
			es, rugs, telephones, desks, chairs, electronic devices	
☑ No				
Yes. De	scribe			\$

Debtor 1	Case Marcus First Name	16-12398 Middle Name	Doc 1	Filed 04/12/16 Document	Entered 04/12/16 11 Page 19 ^{cg} fe 56 ^{nber (17 known)}		
40. Machine	ery, fixtures, e	quipment, supp	lies vou use	in business, and took	s of your trade		
☑ No	•,		•	, , , , , , , , , , , , , , , , , , ,	· , · - · · · · · · · · · · · · · · · · ·		
	Describe						•
							\$
44 Incomérci	···						
41. Invento	ry						
☐ Yes.	Describe						\$
42. Interests	s in partnershi	ps or joint vent	ures				
☑ No							
Yes.	Describe	Name of entity:			% 0	f ownership:	
			*****			%	\$
			****			%	\$
		W	·		**************************************	%	\$
43 Cuetom	ar liete mailin	g lists, or other	compilation	•			
₩ No	er noto, manny	g nata, or other	COMPHACION	.			
Yes.	Do your lists	include persona	ally identifia	ble information (as def	ined in 11 U.S.C. § 101(41A))?		
	☐ No						
	Yes. Descr	ibe					\$
							¥
	iness-related _l	property you die	d not already	y list			
₩ No	0.						
	Give specific mation				A CONTRACTOR OF THE CONTRACTOR		\$
				00000000000000000000000000000000000000			\$
		**************************************		****			\$
							\$
							\$
							¢
							Y
					ies for pages you have attache		\$0.00
Part 6:	Describe An	y Farm- and C	Commercia	l Fishing-Related P	roperty You Own or Have a	n Interest	ln.
<u> </u>	If you own or	have an interes	t in farmland	d, list it in Part 1.			
46 Do vou c	wn or have ar	v legal or equit	ahla intarae	t in any farm, or comm	ercial fishing-related property?	•	
	So to Part 7.	iy legal ol equit	able litteres	tin any famin- or comm	ierciai namig-related property r		
	Go to line 47.						
							Current value of the
							portion you own?
							Do not deduct secured claims or exemptions.
47. Farm an			4 P - 1.				
	s: Livestock, po	oultry, farm-raised	a tish				
☑ No ☐ Yes							

Debtor 1	Marcuse :	16-12398 Middle Name	Doc 1	Filed 04/12/1 Document		d 04/12/16 11:51:45) @\$s\$@mber (# known)		
48. Crops—e	ither growing	or harvested						
Z No	Give specific	y or marvostod						
	nation						\$	
49. Farm and	l fishing equi	pment, implem	ents, machin	ery, fixtures, and to	ools of trade			
							\$	<u> </u>
50. Farm and	fishing supp	lies, chemicals	s, and feed					
			-				\$	
51. Any farm-	and comme	cial fishing-rel	ated property	y you did not airead	ly list			
	Give specific ation							
		. all af		400			\$	
for Part 6.	. Write that n	umber here	ries from Pai	T b, including any e	ntries for page	s you have attached	\$	0.00
Part 7:	escribe A	Il Property	You Own	or Have an Inte	rest in That	You Did Not List Abov	e	
53. Do you ha	ve other pro	perty of any kir	nd you did no	ot already list?				
Examples: \$	Season tickets, o	country club memb	pership					
	ive specific						\$	
							\$ \$	
er Andriate - J	- 11 m	-B - F					 	0.00
54. Add the do	oliar value of	all of your entr	ies from Parl	t 7. Write that numb	er here	······	\$	0.00
Part 8:	ist the To	tals of Each	Part of th	is Form				
55, Part 1: Tot	al real estate	, line 2				-	\$	0.00
56. Part 2: Tot	al vehicles, li	ne 5		\$	0.00	<u>.</u>		
57. Part 3: Tot	al personal a	nd household i	tems, line 15	\$	700.00) -		
58. Part 4: Tot	al financial as	ssets, line 36		\$		_		
59. Part 5: Tota	al business-r	elated property	, line 45	\$		-		
60. Part 6: Tota	al farm- and f	ishing-related _l	property, line	52 \$		-		
61. Part 7: Tot	al other prope	erty not listed, l	line 54	+\$		-		
62. Total perso	onal property.	Add lines 56 th	rough 61	····· \$	3,700.00	_ Copy personal property total =	+ \$	3,700.00
63. Total of all	property on 5	Schedule A/R /	Add line 55 +	line 62			_	3,700.00
	, ,		Lag into OO T) p	

		Case 16-12398	Doc 1	Filed 04/12/16	Entered 04/12/16 11:51: Page 21 of 56	45 Desc Main
F	ill in this ir	nformation to identify yo	ur case:		Paue 21 01 30	
0	ebtor 1	Marcus		Morris		•
D	ebtor 2	First Name	Middle Name	Last Name		
ĺ	Spouse, if filing		Middle Name	Last Name	4 Philip the Westerland	
		Bankruptcy Court for the: No	rthern District	of Illinois		
	ase number f known)					☐ Check if this is an amended filing
0	fficial F	Form 106C				
S	ched	lule C: The	Prop	erty You (Claim as Exempt	12/15
Usi spa	ng the prop ce is neede	erty you listed on Schedu	le A/B: Prope	rty (Official Form 106A/	ether, both are equally responsible for si B) as your source, list the property that y ditional Page as necessary. On the top of	you claim as exempt. If more
spe of a reti limi	cific dolla iny applica rement fur its the exe	r amount as exempt. Alt ible statutory limit. Som ids—may be unlimited i	ernatively, y e exemption n dollar amo blar amount	ou may claim the full f s—such as those for l unt. However, if you c and the value of the p	nount of the exemption you claim. On air market value of the property being nealth aids, rights to receive certain b laim an exemption of 100% of fair mai roperty is determined to exceed that	g exempted up to the amount enefits, and tax-exempt rket value under a law that
P	art 1: lo	lentify the Property \	fou Claim a	as Exempt		
	You a	re claiming state and fede re claiming federal exemp	ral nonbankri tions. 11 U.S	uptcy exemptions. 11 U s.C. § 522(b)(2)	our spouse is filing with you. S.C. § 522(b)(3)	
	Brief des Schedule	cription of the property a A/B that lists this proper		Current value of the portion you own	Amount of the exemption you claim	Specific laws that allow exemption
				Copy the value from Schedule A/B	Check only one box for each exemption.	
	Brief descriptio	n <u>Furniture</u>		\$ 1,600.00	☑ \$ 1,600.00	735 ILCS 5/12-1001(b)
	Line from Schedule	c			100% of fair market value, up to any applicable statutory limit	
	Brief descriptio	n: <u>Clothes</u>		\$ <u>500.00</u>	☑ \$ 500.00	735 ILCS 5/12-1001(b)
	Line from Schedule	A/B: 11			☐ 100% of fair market value, up to any applicable statutory limit	
	Brief description	n: <u>Electronics</u>		<u> 1,600.00</u>		735 ILCS 5/12-1001(b)
	Line from Schedule	A/B: 7			☐ 100% of fair market value, up to any applicable statutory limit	
3.		laiming a homestead ex			filed on or after the date of adjustment.)	
	Mo No		0.01, 0 ye	are that for Cases	med on or and the date of adjustment.)	
			y covered by	the exemption within 1,	215 days before you filed this case?	
	21 N					

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Additional Page

Brief description of the property and line on Schedule A/B that lists this property		Current value of the portion you own	Amount of the exemption you claim	Specific laws that allow exemption
		Copy the value from Schedule A/B	Check only one box for each exemption	
Brief description: Line from Schedule A/B:		\$	\$ 100% of fair market value, up to any applicable statutory limit	
Brief description:	Table To the Control of the Control	\$	□ \$ □ 100% of fair market value, up to	
Line from Schedule A/B:			any applicable statutory limit	
Brief description:	The state of the s	\$	□ \$	
Line from Schedule A/B:			☐ 100% of fair market value, up to any applicable statutory limit	
Brief description: Line from Schedule A/B:	HILDER AND	\$	\$ \$ and the statutory limit	
Brief description:	***************************************	\$	□ \$	
Line from Schedule A/B;			☐ 100% of fair market value, up to any applicable statutory limit	
Brief description:		\$		
Line from Schedule A/B:			☐ 100% of fair market value, up to any applicable statutory limit	
Brief description:		\$	\$ 100% of fair market value, up to	
Line from Schedule A/B: Brief			any applicable statutory limit	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
description: Line from Schedule A/B:		\$	□ \$ □ 100% of fair market value, up to any applicable statutory limit	
Brief				
description: Line from Schedule A/B:		\$	\$ to any applicable statutory limit	
Brief		•	□ \$	11000000
description: Line from Schedule A/B:		<u> </u>	100% of fair market value, up to any applicable statutory limit	
Brief description:		\$	<u> </u>	
Line from Schedule A/B:			100% of fair market value, up to any applicable statutory limit	
Brief description:	, market	\$	0 \$	
Line from Schedule A/B:			100% of fair market value, up to any applicable statutory limit	

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		Page 23 of 56			
Fill in this information to identify your ca	ase:				
Debtor 1 Marcus First Name Middle	Morris				
Debtor 2	Name Last Name				
(Spouse, if filing) First Name Middle	Name Last Name	7			
United States Bankruptcy Court for the: Northern	n District of Illinois	ļ			
Case number(If known)	**************************************			Charle	IE ALT. 1.
					if this is an ed filing
Official Farms 400D				ariona	od ming
Official Form 106D		_			
Schedule D: Creditor					12/15
Be as complete and accurate as possible	. If two married people are filing	together, both are ed	qually responsible	for supplying correc	t
information. If more space is needed, cop additional pages, write your name and ca	by the Additional Page, fill it out, ise number (if known).	number the entries,	and attach it to this	s form. On the top of	any
A Barrier and Plant and					
1. Do any creditors have claims secured I					
No. Check this box and submit this for Yes. Fill in all of the information below	THE COURT WITH YOUR OTHER SCHE	edules. You have noth	ng else to report on	this form.	
	•				
Part 1: List All Secured Claims					
	_		Column A	Column B	Column C
List all secured claims. If a creditor has r for each claim. If more than one creditor h	more than one secured claim, list the other	ne creditor separately	Amount of claim	Value of collateral	Unsecured
As much as possible, list the claims in alpl	habetical order according to the cre	editor's name.	Do not deduct the value of collateral.	that supports this claim	portion If any
2.1	Describe the property that conve	the etel	_		ii u.i.y
Creditor's Name	Describe the property that secu	res the claim;	\$	\$	\$
	_				
Number Street					
	As of the date you file, the claim Contingent	is: Check all that apply.			
	Unliquidated				
City State ZIP Code	☐ Disputed				
Who owes the debt? Check one.	Nature of lien. Check all that apply.				
Debtor 1 only	An agreement you made (such a	is mortgage or secured			
Debtor 2 only Debtor 1 and Debtor 2 only	car loan) Statutory lien (such as tax lien, n				
At least one of the debtors and another	Judgment lien from a lawsuit	nechanic's lien)			
☐ Check if this claim relates to a	Other (including a right to offset)				
community debt					
Date debt was incurred	Last 4 digits of account number				
2.2	Describe the property that secur	es the claim:	\$	\$\$	i_
Creditor's Name					
Number Street					
	As of the date you file, the claim	is: Check all that apply.			
	Contingent				
City State ZIP Code	☐ Unliquidated☐ Disputed				
Who owes the debt? Check one.					
Debtor 1 only	Nature of lien. Check all that apply.				
Debtor 2 only	An agreement you made (such as car loan)				
Debtor 1 and Debtor 2 only	Statutory lien (such as tax lien, m	echanic's lien)			
At least one of the debtors and another	Judgment lien from a lawsuit				
Check if this claim relates to a community debt	Other (including a right to offset)				
Date debt was incurred	Last 4 digits of account number				

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Marcus

☐ Check if this claim relates to a community debt Date debt was incurred ___

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Additional Page Part 1: After listing any entries on this by 2.4, and so forth.	page, number them beginning with 2.3, followed	Column A Amount of claim Do not deduct the value of collateral.	Column B Value of collateral that supports this claim	Column C Unsecured portion If any
	Describe the property that secures the claim:	 	\$	\$
Creditor's Name	• • •	*		Ψ
Number Street	-			
City State ZIP Code	As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed			
Who owes the debt? Check one.	Nature of lien. Check all that apply.			
Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim relates to a community debt	 □ An agreement you made (such as mortgage or secured car loan) □ Statutory lien (such as tax lien, mechanic's lien) □ Judgment lien from a lawsuit □ Other (including a right to offset) 			
Date debt was incurred	Last 4 digits of account number			
Creditor's Name	Daniel de la constant	\$	\$\$	3
Number Street	As of the date you file, the claim is: Check all that apply. Contingent			
City State ZIP Code	Unliquidated			
Who owes the debt? Check one.	☐ Disputed			
Debtor 1 only	Nature of lien. Check all that apply.			
Debtor 2 only	An agreement you made (such as mortgage or secured			
Debtor 1 and Debtor 2 only	car loan) Statutory lien (such as tax lien, mechanic's lien)			
At least one of the debtors and another	Judgment lien from a lawsuit			
Check if this claim relates to a community debt	Other (including a right to offset)			
Date debt was incurred	Last 4 digits of account number			
Creditor's Name	Describe the property that secures the claim:	\$	\$\$	MATERIA
Number Street				
City State ZIP Code	As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed			
Who owes the debt? Check one.	Nature of lien. Check all that apply.			
Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only	 An agreement you made (such as mortgage or secured car loan) Statutory lien (such as tax lien, mechanic's lien) 			
At least one of the debtors and another	Judgment lien from a lawsuit			

Add the dollar value of your entries in Column A on this page. Write that number here: \$_

Other (including a right to offset) _

Last 4 digits of account number _____

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Debtor 1

Marcus

Middle Name

Last Name

Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

L					On which line in Part 1 did you enter the creditor?
	Name		- Valida ili. et		Last 4 digits of account number
	Number	Street		V444444	_
	<u></u>				
-	City		State	ZIP Code	
	Name				On which line in Part 1 did you enter the creditor? Last 4 digits of account number
	Number	Stroot			
	Number	Street			
	City		State	ZIP Code	-
					On which line in Part 1 did you enter the creditor?
	Name				Last 4 digits of account number
	Number	Street			_
	City	Maria	State	ZIP Code	_ ~
			2	2.11 0000	On which line in Part 1 did you enter the creditor?
	Name				Last 4 digits of account number
	Number	Street			-
	City				-
	City		State	ZIP Code	
	Name				On which line in Part 1 did you enter the creditor? Last 4 digits of account number
	Number	Street			-
					-
	City		State	ZIP Code	
	Name	Washing			On which line in Part 1 did you enter the creditor?
	riaille				Last 4 digits of account number
	Number	Street			
	City		Stata	71D Codo	

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Debtor 1	normation to identity ye	our case.	01 50	
	Marcus First Name		Morris	
Debtor 2	LASY MAILE	Middle Name	Last Name	
(Spouse, if filing)	First Name	Middle Name	Last Name	
United States I	Bankruptcy Court for the: N	orthern District o	of tilinois	
Case number	***************************************			Check if this is an
(If known)				amended filing
Official F	Form 106E/F			
Schedu	ule E/F: Cred	litors W	ho Have Unsecured Claims	12/15
Be as completed List the other A/B: Property creditors with needed, copy any additional	te and accurate as poss party to any executory (Official Form 106A/B) partially secured claim	sible. Use Part contracts or ur and on Schedus that are listed out, number the and case number the sout, number the sout of the south of the so	1 for creditors with PRIORITY claims and Part 2 for creditors with nexpired leases that could result in a claim. Also list executory colle G: Executory Contracts and Unexpired Leases (Official Form 1 in Schedule D: Creditors Who Have Claims Secured by Property the entries in the boxes on the left. Attach the Continuation Page to other (if known).	NONPRIORITY claims. contracts on Schedule 06G). Do not include any
1. Do any cre No. Go	editors have priority unstate to Part 2.	secured claims	against you?	
List all of y each claim nonpriority a unsecured a	listed, identify what type amounts. As much as po claims, fill out the Contine	of claim it is. If a ssible, list the cl uation Page of P	ditor has more than one priority unsecured claim, list the creditor sepala claim has both priority and nonpriority amounts, list that claim here an aims in alphabetical order according to the creditor's name. If you have part 1. If more than one creditor holds a particular claim, list the other contents.	nd show both priority and
(For an exp	planation of each type of	claim, see the in	structions for this form in the instruction booklet.)	
			Total claim	Priority Nonpriority amount amount
2.1 Illinois I	Department of Reve	nue	Last 4 digits of account number 0 3 2 2 \$	\$ \$
Priority Credi	itor's Name			ΨΨ
POB 10	Street		When was the debt incurred?	
Galesbi	urg IL		As of the date you file, the claim is: Check all that anniv	
		61402	As of the date you file, the claim is: Check all that apply. Contingent	
Cíty	State	61402 ZIP Code	☑ Contingent	
City Who incu r	State rred the debt? Check one.			
City Who incur ☑ Debtor	State rred the debt? Check one. 1 only		✓ Contingent Unliquidated Disputed	
Who incur Debtor	State rred the debt? Check one. 1 only 2 only		Contingent Unliquidated Disputed Type of PRIORITY unsecured claim:	
Who incur Debtor Debtor Debtor	State rred the debt? Check one. 1 only 2 only 1 and Debtor 2 only	ZIP Code	✓ Contingent Unliquidated Disputed Type of PRIORITY unsecured claim: Domestic support obligations	
Who incur Debtor Debtor Debtor At least	State rred the debt? Check one. 1 only 2 only	ZiP Code	Contingent Unliquidated Disputed Type of PRIORITY unsecured claim: Domestic support obligations Taxes and certain other debts you owe the government	
City Who incur Debtor Debtor Debtor At least	State rred the debt? Check one. 1 only 2 only 1 and Debtor 2 only cone of the debtors and anot	ZiP Code	✓ Contingent Unliquidated Disputed Type of PRIORITY unsecured claim: Domestic support obligations	
City Who incur Debtor Debtor Debtor At least Check Is the clair	State rred the debt? Check one. 1 only 2 only 1 and Debtor 2 only 1 one of the debtors and anot if this claim is for a com	ZiP Code	Contingent Unliquidated Disputed Type of PRIORITY unsecured claim: Domestic support obligations Taxes and certain other debts you owe the government Claims for death or personal injury while you were	
Who incur Debtor Debtor Debtor At least Check	State rred the debt? Check one. 1 only 2 only 1 and Debtor 2 only 1 one of the debtors and anot if this claim is for a com	ZiP Code	Contingent Unliquidated Disputed Type of PRIORITY unsecured claim: Domestic support obligations Taxes and certain other debts you owe the government Claims for death or personal injury while you were intoxicated	
City Who incur Debtor Debtor At least Check Is the clair No Yes	State rred the debt? Check one. 1 only 2 only 1 and Debtor 2 only cone of the debtors and anot if this claim is for a com m subject to offset?	ZiP Code	✓ Contingent Unliquidated Disputed Type of PRIORITY unsecured claim: Domestic support obligations ✓ Taxes and certain other debts you owe the government Claims for death or personal injury while you were intoxicated Other. Specify	
City Who incur Debtor Debtor At least Check Is the clair No Yes	State rred the debt? Check one. 1 only 2 only 1 and Debtor 2 only cone of the debtors and anot if this claim is for a com m subject to offset?	ZiP Code	Contingent Unliquidated Disputed Type of PRIORITY unsecured claim: Domestic support obligations Taxes and certain other debts you owe the government Claims for death or personal injury while you were intoxicated Other. Specify Last 4 digits of account number	\$\$
City Who incur Debtor Debtor At least Check Is the clair No Yes	State rred the debt? Check one. 1 only 2 only 1 and Debtor 2 only cone of the debtors and anot if this claim is for a com m subject to offset?	ZiP Code	✓ Contingent Unliquidated Disputed Type of PRIORITY unsecured claim: Domestic support obligations ✓ Taxes and certain other debts you owe the government Claims for death or personal injury while you were intoxicated Other. Specify	\$\$
City Who incut Debtor Debtor At least Check Is the clair No Yes 2.2	State rred the debt? Check one. 1 only 2 only 1 and Debtor 2 only t one of the debtors and anot if this claim is for a com m subject to offset?	ZiP Code	Contingent Unliquidated Disputed Type of PRIORITY unsecured claim: Domestic support obligations Taxes and certain other debts you owe the government Claims for death or personal injury while you were intoxicated Other. Specify Last 4 digits of account number	\$\$
City Who incut Debtor Debtor At least Check Is the clair No Yes 2.2 Priority Credit	State rred the debt? Check one. 1 only 2 only 1 and Debtor 2 only t one of the debtors and anot if this claim is for a com m subject to offset? tor's Name Street	ZiP Code her munity debt	Contingent Unliquidated Disputed Type of PRIORITY unsecured claim: Domestic support obligations Taxes and certain other debts you owe the government Claims for death or personal injury while you were intoxicated Other. Specify Last 4 digits of account number	\$\$_
City Who incur Debtor Debtor At least Check Is the clair No Yes 2.2 Priority Credit	State rred the debt? Check one. 1 only 2 only 1 and Debtor 2 only 1 one of the debtors and anot if this claim is for a com m subject to offset? Street	ZiP Code	Contingent Unliquidated Disputed Type of PRIORITY unsecured claim: Domestic support obligations Taxes and certain other debts you owe the government Claims for death or personal injury while you were intoxicated Other. Specify Last 4 digits of account number	\$\$
City Who incur Debtor Debtor At least Check Is the clair No Yes 2.2 Priority Credit Number City Who incur	State rred the debt? Check one. 1 only 2 only 1 and Debtor 2 only 1 one of the debtors and anot if this claim is for a com m subject to offset? tor's Name Street State rred the debt? Check one.	ZiP Code her munity debt	Contingent Unliquidated Disputed Type of PRIORITY unsecured claim: Domestic support obligations Taxes and certain other debts you owe the government Claims for death or personal injury while you were intoxicated Other. Specify Last 4 digits of account number	\$\$
City Who incur Debtor 2 Debtor 3 Debtor 3 At least Check Is the clair No Yes 2.2 Priority Credit Number City Who incur Debtor 1	State rred the debt? Check one. 1 only 2 only 1 and Debtor 2 only 1 one of the debtors and anot if this claim is for a com m subject to offset? State red the debt? Check one. 1 only	ZiP Code her munity debt	Contingent Unliquidated Disputed Type of PRIORITY unsecured claim: Domestic support obligations Taxes and certain other debts you owe the government Claims for death or personal injury while you were intoxicated Other. Specify Last 4 digits of account number	\$\$
City Who incur Debtor 2 Debtor 2 At least Check Is the clair No Yes 2.2 Priority Credit Number City Who incur Debtor 2 Debtor 2	State rred the debt? Check one. 1 only 2 only 1 and Debtor 2 only 1 one of the debtors and anot if this claim is for a com m subject to offset? State State red the debt? Check one. 1 only 2 only	ZiP Code her munity debt	Contingent Unliquidated Disputed Type of PRIORITY unsecured claim: Domestic support obligations Taxes and certain other debts you owe the government Claims for death or personal injury while you were intoxicated Other. Specify Last 4 digits of account number	\$\$
City Who incur Debtor 2 Debtor 3 Debtor 3 At least Check Is the clair No Yes 2.2 Priority Credit Number City Who incur Debtor 1 Debtor 2 Debtor 1	State rred the debt? Check one. 1 only 2 only 1 and Debtor 2 only 1 one of the debtors and anot if this claim is for a com m subject to offset? State red the debt? Check one. 1 only 2 only 1 and Debtor 2 only	ZiP Code ther munity debt ZiP Code	Contingent Unliquidated Disputed Type of PRIORITY unsecured claim: Domestic support obligations Taxes and certain other debts you owe the government Claims for death or personal injury while you were intoxicated Other. Specify Last 4 digits of account number	\$\$
City Who incur Debtor Debtor At least Check Is the clair No Yes 2.2 Priority Credit Number City Who incur Debtor 1 Debtor 1 At least At least	State rred the debt? Check one. 1 only 2 only 1 and Debtor 2 only 1 one of the debtors and anot if this claim is for a com m subject to offset? State red the debt? Check one. 1 only 2 only 1 and Debtor 2 only one of the debtors and anot	ZiP Code ther munity debt ZiP Code	Contingent Unliquidated Disputed Type of PRIORITY unsecured claim: Domestic support obligations Taxes and certain other debts you owe the government Claims for death or personal injury while you were intoxicated Other. Specify Last 4 digits of account number	\$\$
City Who incur Debtor 2 Debtor 3 At least Check Is the clair No Yes 2.2 Priority Credit Number City Who incur Debtor 2 Debtor 3 At least	State rred the debt? Check one. 1 only 2 only 1 and Debtor 2 only 1 one of the debtors and anot if this claim is for a com m subject to offset? State red the debt? Check one. 1 only 2 only 1 and Debtor 2 only	ZiP Code ther munity debt ZiP Code	Contingent Unliquidated Disputed Type of PRIORITY unsecured claim: Domestic support obligations Taxes and certain other debts you owe the government Claims for death or personal injury while you were intoxicated Other. Specify Last 4 digits of account number	\$\$

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Part 1:

Your PRIORITY Unsecured Claims — Continuation Page

er listing any entries on this page, number the	m beginning with 2.3, followed by 2.4, and so forth.	Total claim	Priority amount	Nonpriority amount
Priority Creditor's Name	Last 4 digits of account number	\$. \$	\$
Number Street	When was the debt incurred?			
Adminer Street	As of the date you file, the claim is: Check all that apply.			
	Contingent			
City State ZIP Code	Unliquidated			
Who incurred the debt? Check one.	☐ Disputed			
Debtor 1 only	Type of PRIORITY unsecured claim:			
Debtor 2 only				
Debtor 1 and Debtor 2 only	Domestic support obligations			
☐ At least one of the debtors and another	Taxes and certain other debts you owe the government Claims for death or personal injury while you were			
☐ Check if this claim is for a community debt	intoxicated Other. Specify			
Is the claim subject to offset?				
☐ No				
☐ Yes				
Priority Creditor's Name	Last 4 digits of account number	\$	\$	\$
Number Street	When was the debt incurred?			
	As of the date you file, the claim is: Check all that apply.			
	☐ Contingent			
City State ZIP Code	☐ Unliquidated			
	☐ Disputed			
Who incurred the debt? Check one.				
Debtor 1 only Debtor 2 only	Type of PRIORITY unsecured claim:			
Debtor 1 and Debtor 2 only	Domestic support obligations			
At least one of the debtors and another	Taxes and certain other debts you owe the government			
☐ Check if this claim is for a community debt	☐ Claims for death or personal injury while you were intoxicated ☐ Other. Specify			
ls the claim subject to offset?	Otter. Opecity			
No				
Yes				
Priority Creditor's Name	Last 4 digits of account number	\$	\$	\$
,	When was the debt incurred?			
umber Street	when was the dept mentined?			
40.404	As of the date you file, the claim is: Check all that apply.			
	☐ Contingent			
City State ZIP Code	☐ Unliquidated			
Alba inaugual the dabta Charles	☐ Disputed			
Who incurred the debt? Check one. Debtor 1 only	Type of PRIORITY upges and all the			
Debtor 1 only Debtor 2 only	Type of PRIORITY unsecured claim:			
Debtor 2 only Debtor 1 and Debtor 2 only	Domestic support obligations			
At least one of the debtors and another	Taxes and certain other debts you owe the government			
Check if this claim is for a community debt	Claims for death or personal injury while you were intoxicated Other. Specify			
s the claim subject to offset?	Conci. Openiy			
T No				

Debtor	1

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Part 2:

List All of Your NONPRIORITY Unsecured Claims

3.	Do any creditors have nonpriority unsecured clai	• .			
	☐ No. You have nothing to report in this part. Subm☐ Yes	nit this form to the	e court with your other schedules.		
	nonpriority unsecured claim, list the creditor separate	ely for each claim	order of the creditor who holds each claim. If a creditor has not each claim listed, identify what type of claim it is. Do not ist the other creditors in Part 3.If you have more than three not	list clain	ns already
_	1			Total	claim
4.1	Comcast		Last 4 digits of account number 0 3 2 2		1,600.00
	Nonpriority Creditor's Name		When was the debt incurred?	\$	1,000.00
	POB 3002 Number Street	· · · · · · · · · · · · · · · · · · ·	When was the dept lifetifed?		
	Southeastern, PA 19398				
	City State 2	ZIP Code	As of the date you file, the claim is: Check all that apply.		
			Contingent		
	Who incurred the debt? Check one.		Unliquidated		
	Debtor 1 only Debtor 2 only		☐ Disputed		
	Debtor 1 and Debtor 2 only		Type of NONPRIORITY unsecured claim:		
	☐ At least one of the debtors and another		Student loans		
	☐ Check if this claim is for a community debt		Obligations arising out of a separation agreement or divorce		
	·		that you did not report as priority claims		
	Is the claim subject to offset? ✓ No		Debts to pension or profit-sharing plans, and other similar debts Other. Specify Cable		
	Yes		Other, Specify Cable		
					4 000 00
4.2	MCSI		Last 4 digits of account number 0 3 2 2	\$	4,000.00
	Nonpriority Creditor's Name		When was the debt incurred?		
	7330 W College Dr Number Street				
	Palos Heights, IL 60463		As of the date you file, the claim is: Check all that apply.		
	City State Z	IP Code	☐ Contingent		
	Who incurred the debt? Check one.		Unliquidated		
	Debtor 1 only		☐ Disputed		
	Debtor 2 only		Type of NONPRIORITY unsecured claim:		
	Debtor 1 and Debtor 2 only At least one of the debtors and another		☐ Student loans		
			Obligations arising out of a separation agreement or divorce		
	☐ Check if this claim is for a community debt		that you did not report as priority claims		
	Is the claim subject to offset?		Debts to pension or profit-sharing plans, and other similar debts Other. Specify Ticket in Richton Parks		
	✓ No ☐ Yes		Otter. Specify Troket in Province in Provi		
4.3					
	Nicor Nonpriority Creditor's Name		Last 4 digits of account number 0 3 2 2	\$	400.00
	POB 5407		When was the debt incurred?	4	
	Number Street				
		60197	As of the date you file, the claim is: Check all that apply.		
	City State Z	iP Code	☑ Contingent		
	Who incurred the debt? Check one.		Unliquidated		
	Debtor 1 only		Disputed		
	Debtor 2 only Debtor 1 and Debtor 2 only				
	At least one of the debtors and another		Type of NONPRIORITY unsecured claim:		
	☐ Check if this claim is for a community debt		Student loans		
	·		Obligations arising out of a separation agreement or divorce that you did not report as priority claims		
	Is the claim subject to offset? ✓ No		Debts to pension or profit-sharing plans, and other similar debts		
	Yes		Other. Specify <u>Utility</u>		

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Part 2:

Your NONPRIORITY Unsecured Claims — Continuation Page

er listing any entries on this page, number them beginning w	and the second s	Total claim
St James	Last 4 digits of account number 0 3 2 2	\$ 2,000.0
Nonpriority Creditor's Name	When was the debt incurred?	T
1423 Chicago Rd Number Street	MANAGAMAN AND AND AND AND AND AND AND AND AND A	
Chicago Heights, IL 60411	As of the date you file, the claim is: Check all that apply.	
City State ZIP Code	Contingent	
Who incurred the debt? Check one.	☐ Unliquidated ☐ Disputed	
Debtor 1 only	☐ Disputed	
Debtor 2 only	Type of NONPRIORITY unsecured claim:	
Debtor 1 and Debtor 2 only	☐ Student loans	
At least one of the debtors and another	Obligations arising out of a separation agreement or divorce that	
☐ Check if this claim is for a community debt	you did not report as priority claims	
Is the claim subject to offset?	Debts to pension or profit-sharing plans, and other similar debts Other. Specify Medical	
□ No	и Опет. Specify итосност	
Yes		
	0.2.2.2	4.400.4
Tmobile	Last 4 digits of account number 0 3 2 2	\$ <u>1,100.0</u>
Nonpriority Creditor's Name POB 51843	When was the debt incurred?	
Number Street		
Los Angeles, CA 90051	As of the date you file, the claim is: Check all that apply.	
City State ZIP Code	Contingent	
Who incurred the debt? Check one.	Unliquidated	
Debtor 1 only	☐ Disputed	
Debtor 2 only	Type of NONPRIORITY unsecured claim:	
Debtor 1 and Debtor 2 only	• •	
At least one of the debtors and another	Student loansObligations arising out of a separation agreement or divorce that	
☐ Check if this claim is for a community debt	you did not report as priority claims	
•	Debts to pension or profit-sharing plans, and other similar debts	
Is the claim subject to offset?	Other. Specify Cell phone	
Mo No ☐ Yes		
168		
	2 2 2	\$
Speedy Cash	Last 4 digits of account number 0 3 2 2	-
Nonpriority Creditor's Name	When was the debt incurred?	
POB #780408 Number Street	The state of the s	
Wichita, KS 67278	As of the date you file, the claim is: Check all that apply.	
City State ZIP Code	✓ Contingent	
Allho increment the debt? Cheek and	Unliquidated	
Who incurred the debt? Check one.	☐ Disputed	
☑ Debtor 1 only ☐ Debtor 2 only	Type of NONDBIODITY was a sound at the	
Debtor 1 and Debtor 2 only	Type of NONPRIORITY unsecured claim:	
At least one of the debtors and another	Student loans	
	 Obligations arising out of a separation agreement or divorce that you did not report as priority claims 	
☐ Check if this claim is for a community debt	Debts to pension or profit-sharing plans, and other similar debts	
Is the claim subject to offset?	other Specify Payday loan	
Mo No		
☐ Yes		

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Part 2:

Your NONPRIORITY Unsecured Claims - Continuation Page

r listing any entries on this page, number them beginning w	ith 4.4, followed by 4.5, and so forth.	Total clain
Illinois Tollway	Last 4 digits of account number 0 3 2 2	_{\$} 1,000.6
Nonpriority Creditor's Name	When was the debt incurred?	
2700 Ogden Ave Number Street		
Downers Grove, IL 60515	As of the date you file, the claim is: Check all that apply.	
City State ZIP Code	Contingent	
Who incurred the debt? Check one.	Unliquidated Disputed	
↓ Debtor 1 only		
Debtor 2 only	Type of NONPRIORITY unsecured claim:	
Debtor 1 and Debtor 2 only	Student loans	
At least one of the debtors and another	Obligations arising out of a separation agreement or divorce that	
☐ Check if this claim is for a community debt	you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts	
is the claim subject to offset?	Other, Specify Medical	
□ No		
Yes		
Otto Literal	Last 4 digits of account number 0 3 2 2	s 1,000.0
City Hall Nonpriority Creditor's Name		<u> </u>
121 N LaSalle St	When was the debt incurred?	
Number Street	As of the date you file, the claim is: Check all that apply.	
Chicago, IL60602	<u> </u>	
City State ZIP Code	✓ Contingent ☐ Unliquidated	
Who incurred the debt? Check one.	Disputed	
Debtor 1 only	·	
Debtor 2 only	Type of NONPRIORITY unsecured claim:	
Debtor 1 and Debtor 2 only At least one of the debtors and another	Student loans	
	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
☐ Check if this claim is for a community debt	Debts to pension or profit-sharing plans, and other similar debts	
Is the claim subject to offset?	Other Specify Tickets	
₩ No		
☐ Yes		
		\$
	Last 4 digits of account number	Ψ
Nonpriority Creditor's Name	When was the debt incurred?	
Number Street	As of the date you file, the claim is: Check all that apply.	
City State ZIP Code	Contingent	
•	☐ Unliquidated	
Who incurred the debt? Check one.	☐ Disputed	
Debtor 1 only	Time of MONDBIODITY are a size of a lating	
Debtor 2 only Debtor 1 and Debtor 2 only	Type of NONPRIORITY unsecured claim:	
At least one of the debtors and another	Student loans	
	 Obligations arising out of a separation agreement or divorce that you did not report as priority claims 	
Check if this claim is for a community debt	Debts to pension or profit-sharing plans, and other similar debts	
Is the claim subject to offset?	Other. Specify	
☐ No ☐ Yes		

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List Others to Be Notified About a Debt That You Already Listed Part 3:

5. Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

Line of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claim
Last 4 digits of account number
Last 4 digits of account fidinger
On which entry in Part 1 or Part 2 did you list the original creditor?
Line of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims
Last 4 digits of account number
On which entry in Part 1 or Part 2 did you list the original creditor?
Line of (Check one): Part 1: Creditors with Priority Unsecured Claims
Part 2: Creditors with Nonpriority Unsecured Claims
Last 4 digits of account number
On which entry in Part 1 or Part 2 did you list the original creditor?
Line of (Check one): Part 1: Creditors with Priority Unsecured Claims
Part 2: Creditors with Nonpriority Unsecured Claims
Last 4 digits of account number
On which entry in Part 1 or Part 2 did you list the original creditor?
Line of (Check one): Part 1: Creditors with Priority Unsecured Claims
Part 2: Creditors with Nonpriority Unsecured Claims
Last 4 digits of account number
On which entry in Part 1 or Part 2 did you list the original creditor?
Line of (Check one): Part 1: Creditors with Priority Unsecured Claims
Part 2: Creditors with Nonpriority Unsecured Claims
Last 4 digits of account number
On which entry in Part 1 or Part 2 did you list the original creditor?
•
Line of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims
l set A digite of account number

Part 4:

Maase 16-12398

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Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. § 159. Add the amounts for each type of unsecured claim.

		Total claim
Total claims	6a. Domestic support obligations	6a. \$
from Part 1	6b. Taxes and certain other debts you owe the government	6b. <u>\$</u>
	6c. Claims for death or personal injury while you v intoxicated	vere 6c. \$
	6d. Other. Add all other priority unsecured claims. Write that amount here.	6d. + s
	6e. Total. Add lines 6a through 6d.	6e. s0.00
		Total claim
Total claims from Part 2	6f. Student loans	6f. \$
	6g. Obligations arising out of a separation agreem or divorce that you did not report as priority claims	ent 6g. \$
	6h. Debts to pension or profit-sharing plans, and o similar debts	ther 6h. \$
	 Other. Add all other nonpriority unsecured claims. Write that amount here. 	6i. + s 11,100.00
	6j. Total. Add lines 6f through 6i.	6j. \$11,100.00

	Case 10-12398	D0C 1	Document	Page 33 of 56	Desc Main
Fill in this i	nformation to identify yo	our case:			
Debtor	Marcus First Name	Middle Name	Morris Last Name		
Debtor 2 (Spouse if filing)	First Name	Middle Name	Last Name	and the state of t	
United States	Bankruptcy Court for the: No	rthern Distric	t of Illinois		
Case number (If known)					Check if this is an amended filing
Official I	Form 106G				
Sched	ule G: Execu	itory C	ontracts a	nd Unexpired Leases	12/15
information. I	ete and accurate as poss if more space is needed, ges, write your name an	copy the ad	lditional page, fill it ou	g together, both are equally responsible f t, number the entries, and attach it to this	or supplying correct page. On the top of any
1. Do you h	nave any executory cont	racts or une	xpired leases?		
₩ No. C	theck this box and file this	form with the	court with your other se	chedules. You have nothing else to report on	this form.

Yes. Fill in all of the information below even if the contracts or leases are listed on Schedule A/B: Property (Official Form 106A/B).

2. List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and

Person or company with whom you have the contract or lease

unexpired leases.

State what the contract or lease is for

Name				
Number	Street			···
City		State	ZIP Code	<u> </u>
Name				·····
Number	Street	·		
City	·····	State	ZIP Code	
Name				·····
Number	Street			
City		State	ZIP Code	
Name		W	***************************************	
Number	Street			
City		State	ZIP Code	
Name				
Number	Street			

Doc 1 Case 16-12398

First Name

Dogument

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Case number (# kinowin)

Debtor 1

Person or company with whom you have the contract or lease

Additional Page if You Have More Contracts or Leases

What the contract or lease is for

2. <u>2</u>					
	Name				
	Number	Street		11+111+11+11+1+1+1+1+1+1+1+1+1+1+1+1+1+1	
	City		State	ZIP Code	
2					
	Name				WE-11104-15-10-1
	Number	Street			
	City	2 T 1 T 1 T 1 T 1 T 1 T 1 T 1 T 1 T 1 T	State	ZiP Code	
2					
	Name				Michigan and a second a second and a second
	Number	Street			
	City		State	ZIP Code	
2					
	Name				1900
	Number	Street	****	4 To 10 10 10 10 10 10 10 10 10 10 10 10 10	
	City	***************************************	State	ZIP Code	
2					
	Name	····		······································	
	Number	Street			HANTS No common programs
	City		State	ZIP Code	
2					
	Name			74-14-15-14-14-14-14-14-14-14-14-14-14-14-14-14-	
	Number	Street			
	City		State	ZIP Code	
2					
	Name				
	Number	Street			
	City		State	ZIP Code	
2					
	Name		• • • • • • • • • • • • • • • • • • • •		
	Number	Street			
	Citv		State	ZIP Code	

		Case 16-12	2398 Doc 1	Filed 04/12/16	Entered 04/12/16 1	.1:51:45 Desc Main
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Del	btor 1	Marcus First Name	Mori Middle Name	Last Name		
	btor 2 ouse, if filin	g) First Name	Middle Name	Last Name		
Uni	ited State	s Bankruptcy Court for t	the: Northern District			
Cas	se numbe	r -				
	known)					☐ Check if this is an
						amended filing
Off	ficial	Form 106H	nua.			
Sc	hed	ule H: Yo	ur Codebt	ors		12/15
and case	number numbe	the entries in the b r (if known). Answe	ially responsible for loxes on the left. Att er every question.	supplying correct info ach the Additional Pag	mation if more enace ie nooi	ccurate as possible. If two married peopl ded, copy the Additional Page, fill it out, iny Additional Pages, write your name an
	Yes.	No		equivalent live with you did you live?		d current address of that person.
		Name of your spouse, form	er spouse, or legal equivale	nt		
	į	Number Street	- PANTANA Maria			
		City	State		Code	
	shown i Sc <i>hedul</i>	n line 2 again as a d le D (Official Form 1	codebtor only if that	person is a guarantor (Official Form 106E/F),	a codebtor if your spouse is t or cosigner. Make sure you h or Schedule G (Official Form	filing with you. List the person ave listed the creditor on 106G). Use <i>Schedule D</i> ,
	Column	1: Your codebtor			Column 2: TI	he creditor to whom you owe the debt
					Check all so	hedules that apply:
3.1	Name		MINNIA MARINA		Schedul	le D, line
	reanc					le E/F, line
	Number	Street			☐ Schedul	le G, line
	City		Sta	te 2	IP Code	
3.2	New					e D, line
	Name					e E/F, line
	Number	Street				e G, line
	City		Stat	e 2	IP Code	
3.3						

Name

Number

Street

☐ Schedule D, line _____

☐ Schedule E/F, line ____

☐ Schedule G, line ____

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Morris Document Page 36 of 56

Case number (# known)

Debtor 1

Morris Last Name

Marcus First Name

Middle Name

Additional	Page to	List	More	Codebtors

-					
	Column 1.	Your codebtor			Column 2: The creditor to whom you owe the deb
3					Check all schedules that apply:
L	Name				Schedule D, line
					☐ Schedule E/F, line
	Number	Street			─ Schedule G, line
	City		State	ZIP Code	
3	Name				Schedule D, line
					☐ Schedule E/F, line
	Number	Street			─ Schedule G, line
	City		State	ZIP Code	and the state of t
3	Name				Schedule D, line
					Schedule E/F, line
	Number	Street			Schedule G, line
ıı	City	141-141-1	State	ZIP Code	_
3					Schedule D, line
	Name				Schedule E/F, line
	Number	Street		M	Schedule G, line
	City	· · · · · · · · · · · · · · · · · · ·	State	ZIP Code	1004
3					Cohodule D. line
	Name				Schedule D, line
	Number	Street			Schedule G, line
	City				_
3	Сиу		State	ZIP Code	
LJ	Name				Schedule D, line
					Schedule E/F, line
	Number	Street			Schedule G, line
	City	271004PH00-	State	ZIP Code	_
3	Name			~~~	Schedule D, line
	Name				Schedule E/F, line
	Number	Street			Schedule G, line
	City		State	ZIP Code	-
3]				COUG	
	Name				- Schedule D, line
					Schedule E/F, line
	Number	Street			Schedule G, line
	City		State	ZIP Code	-

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Fill in this informat	ion to identify	your case:					
Debtor 1 Marcus			Morris				
First Nam	ne	Middle Name	Last Name				
Debtor 2 (Spouse, if filing) First Nam	ne	Middle Name	Last Name	**			
United States Bankrup	tcy Court for the:	Northern District of Illino	ois				
Case number			•		Check if	this is:	
(If known)					An ai	nended filing	
						plement showing pos	
Official Form	RAI					ter 13 income as of the	e following date:
		_			MM / E	DD / YYYY	
Schedule	: I: You	r Income					12/13
supplying correct in If you are separated separate sheet to thi	formation. If yo and your spou	essible. If two married po ou are married and not fi se is not filing with you, top of any additional pa ent	iling jointly, and y , do not include ir	our spous	se is living with n about your so	you, include informations	on about your spouse.
Fill in your emplo information.	yment		Debtor 1			Debtor 2 or non-fi	ilina spouse
If you have more t	han one job,						
attach a separate information about employers.	page with	Employment status	Employed Not emplo			Employed Not employed	
Include part-time, self-employed wor							
Occupation may Ir or homemaker, if it		Occupation			10	***************************************	· · · · · · · · · · · · · · · · · · ·
		Employer's name					
		Employer's address					
			Number Street	<u> </u>		Number Street	

			City	State	ZIP Code	City	State ZIP Code
		How long employed the	•	Jiace	Z# Code	City	State ZIP Code
		now long employed the	71 G :	-		All All Andrews and the second	
Part 2: Give D	etails About	Monthly Income					
spouse unless you	are separated.	the date you file this for					
If you or your non-t below. If you need	filing spouse ha more space, at	ve more than one employ tach a separate sheet to t	er, combine the inf his form.	ormation f	or all employers	for that person on the line	es
					For Debtor 1	For Debtor 2 or non-filing spouse	
List monthly gro- deductions). If not	ss wages, sala t paid monthly, o	ry, and commissions (becalculate what the monthly	efore all payroll y wage would be.	2.	0.00	\$	
3. Estimate and list	monthly over	ime pay.		3. + 9	.	+ \$	
4. Calculate gross i	income. Add fin	e 2 + line 3.		4.	0.00	\$	

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Case number (if known) Document Debtor 1

First Name

Middle Name

		For Del	otor 1	For Debtor 2 or non-filing spou		
Copy line 4 here	. 🗲 4.	\$	0.00	\$	99554/Managaran	
5. List all payroll deductions:						
5a. Tax, Medicare, and Social Security deductions	5a.	¢		¢		
5b. Mandatory contributions for retirement plans	5a. 5b.	T		\$		
5c. Voluntary contributions for retirement plans	5c.			\$		
5d. Required repayments of retirement fund loans	5d.	·		\$		
5e. Insurance				\$		
5f. Domestic support obligations	5e.	a		\$		
	5f.	Þ		\$		
5g. Union dues	5g.	\$		\$		
5h. Other deductions. Specify:	5h.	+ \$		+ \$		
6. Add the payroll deductions. Add lines 5a + 5b + 5c + 5d + 5e +5f + 5g +5h	h. 6.	\$		\$		
7. Calculate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$		\$	<u></u>	
8. List all other income regularly received:						
8a. Net income from rental property and from operating a business, profession, or farm						
Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	ο	\$		\$		
8b. Interest and dividends	8a. 8b.					
8c. Family support payments that you, a non-filing spouse, or a depend regularly receive		\$				
Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c.	\$	·····	\$		
8d. Unemployment compensation	8d.	\$		\$		
8e. Social Security	8e.	\$		\$		
8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistathat you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:		\$	*****	\$		
8g. Pension or retirement income	- 0-					
•	8g.	\$		\$		
8h. Other monthly income, Specify:	_ 8h.	+\$		+\$		
9. Add all other income. Add lines 8a + 8b + 8c + 8d + 8e + 8f +8g + 8h.	9.	\$		\$		
 Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. 	10.	\$	0.00	\$]= s	0.00
 State all other regular contributions to the expenses that you list in Schol Include contributions from an unmarried partner, members of your household, other friends or relatives. 			your roomn	nates, and		
Do not include any amounts already included in lines 2-10 or amounts that are Specify:		-	ay expense			
				_	11. + \$	
Add the amount in the last column of line 10 to the amount in line 11. The Write that amount on the Summary of Schedules and Statistical Summary of the					12. \$	0.00
13. Do you expect an increase or decrease within the year after you file this	form?		·	***		nbined thly income
Yes. Explain:						

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Fill in this information to identify your case:			
Debtor 1 Marcus Morris	Check if the	nie ie:	
First Name Middle Name Last Name Debtor 2			
(Spouse, if filing) First Name Middle Name Last Name		ended filing lement showing post	netition chanter 13
United States Bankruptcy Court for the: Northern District of Illinois) have	es as of the following	•
Case number(# known)	MM / DI	D/ YYYY	
		rate filing for Debtor : ins a separate house	
Official Form B 6J	manta	mo a ocparate mouse	noid
Schedule J: Your Expenses			12/13
Be as complete and accurate as possible. If two married people are filinformation. If more space is needed, attach another sheet to this form (if known). Answer every question. Part 1: Describe Your Household			
1. Is this a joint case?			
✓ No. Go to line 2. Yes. Does Debtor 2 live in a separate household?			
Yes. Debtor 2 must file a separate Schedule J.			
2. Do you have dependents?	D		
Do not list Debtor 1 and Debtor 2. Yes. Fill out this information for each dependent	Dependent's relationship to Debtor 1 or Debtor 2	Dependent's age	Does dependent live with you?
Do not state the dependents'	Son	12	✓ No Yes
names.	Daughter	4	No Yes
	Daughter	2 mos	No ✓ Yes
			No
			Yes
			∐ No ∏ Yes
3. Do your expenses include expenses of people other than yourself and your dependents?			
Part 2: Estimate Your Ongoing Monthly Expenses			
Estimate your expenses as of your bankruptcy filing date unless you as	re using this form as a suppler	ment in a Chapter 13 c	ase to report
expenses as of a date after the bankruptcy is filed. If this is a suppleme applicable date.	ental Schedule J, check the bo	x at the top of the form	n and fill in the
Include expenses paid for with non-cash government assistance if you		V	
of such assistance and have included it on Schedule I: Your Income (O	•	Your expe	nses
 The rental or home ownership expenses for your residence. Include any rent for the ground or lot. 	first mortgage payments and	4. \$	
If not included in line 4:			
4a. Real estate taxes		4a. \$	
4b. Property, homeowner's, or renter's insurance			
4c. Home maintenance, repair, and upkeep expenses			
4d. Homeowner's association or condominium dues		AA &	

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Debtor 1

Marcus Morris
First Name Middle Name Last Name

20e. Homeowner's association or condominium dues

Case number (if known)_

20e. \$____

			Your expenses
5.	Additional mortgage payments for your residence, such as home equity loans	5.	\$
6.	Utilities:		
	6a. Electricity, heat, natural gas	6a.	\$
	6b. Water, sewer, garbage collection	6b.	\$
	6c. Telephone, cell phone, Internet, satellite, and cable services	6c.	\$ 50.00
	6d. Other. Specify:	6d.	\$
7.	Food and housekeeping supplies	7.	\$80.00
8.	Childcare and children's education costs	8.	\$400.00
9.	Clothing, laundry, and dry cleaning	9.	\$50.00
10.	Personal care products and services	10.	\$100.00
11.	Medical and dental expenses	11.	\$
12.	Transportation. Include gas, maintenance, bus or train fare.		_
	Do not include car payments.	12.	\$
13.	Entertainment, clubs, recreation, newspapers, magazines, and books	13.	\$
14.	Charitable contributions and religious donations	14.	\$
15.	Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20.		
	15a. Life insurance	15a.	\$
	15b. Health insurance	15b.	\$
	15c. Vehicle insurance	15c.	\$
	15d. Other insurance. Specify:	15d.	\$
6.	Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify:	16.	\$
17.	Installment or lease payments:		
	17a. Car payments for Vehicle 1	17a.	\$
	17b. Car payments for Vehicle 2	17b.	\$
	17c. Other, Specify:	17c.	\$
	17d. Other. Specify:	17d.	\$
	Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form B 6I).	18.	\$
9.	Other payments you make to support others who do not live with you.		
	Specify:	19.	\$
20.	Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Inc.	ome.	
	20a. Mortgages on other property	20a.	\$
	20b. Real estate taxes	20b.	\$
	20c. Property, homeowner's, or renter's insurance	20c.	\$
	20d. Maintenance, repair, and upkeep expenses	20d.	\$

Entered 04/12/16 11:51:45 Desc Main Case 16-12398 Doc 1 Filed 04/12/16 Document Page 41 of 56 Marcus Morris Debtor 1 Case number (if known) First Name Middle Name Last Name 0.00 Other. Specify: Your monthly expenses. Add lines 4 through 21. 680.00 The result is your monthly expenses. 22 23. Calculate your monthly net income. 0.00 23a. Copy line 12 (your combined monthly income) from Schedule I. 23a. 23b. Copy your monthly expenses from line 22 above. 680.00 23b. 23c. Subtract your monthly expenses from your monthly income. -680.00 The result is your monthly net income. 24. Do you expect an increase or decrease in your expenses within the year after you file this form? For example, do you expect to finish paying for your car loan within the year or do you expect your

mortgage payment to increase or decrease because of a modification to the terms of your mortgage?

✓ No.

Explain here:

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Document Page 42 of 56 Fill in this information to identify your case: Marcus Morris Debtor 1 Middle Name Debtor 2 (Spouse, if filing) First Name Middle Name Last Name United States Bankruptcy Court for the: Northern District of Illinois Case number Check if this is an amended filing Official Form 106Dec **Declaration About an Individual Debtor's Schedules** 12/15 If two married people are filing together, both are equally responsible for supplying correct information. You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. Sign Below Did you pay or agree to pay someone who is NOT an attorney to help you fill out bankruptcy forms? M No Yes. Name of person . Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119). Under penalty of perjury, I declare that I have read the summary and schedules filed with this declaration and that they are true and correct. Signature of Debtor 2 Date 4/12/2016 MM / DD / YYYY

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		A SECOND PROPERTY OF THE PROPE		
Marcus First Name	Middle Name	Morris Last Name		
First Name	Middle Name	Last Name		
Bankruptcy Court for	the: Northern District of	Illinois		
				☐ Check if this is ar
		<u>, </u>		amended filing
orm 107				
ent of Fir	nancial Affai	rs for Indiv	iduals Filing for Bankru	otcy 12/1
f more space is i	needed, attach a separ			
own). Answer ev	ery question.			
ive Details Ah	out Your Marital Sta	tus and Whara Y	ou Lived Refore	
Tre Betalls AD		itus dila Piloto I		
our current mari	tal status?			
.di				
e last 3 years, ha	ive you lived anywhere	other than where y	ou live now?	
ist all of the place	es you lived in the last 3	years. Do not include	where you live now.	
tor 1:		Dates Debtor 1	Debtor 2:	Dates Debtor 2
		lived there		lived there
			☐ Same as Debtor 1	☐ Same as Debtor
			_ 33.10 40 2330	_ 000 00 0000
nber Street		From		
		. 110111	Number Street	From
		To	Number Street	From To
		· ——	Number Street	
	State ZIP Code	· ——	Number Street City State ZIP Code	
	State ZIP Code	· ——	City State ZIP Code	To
	State ZIP Code	· ——		To
	State ZIP Code	· ——	City State ZIP Code Same as Debtor 1	To
nber Street	State ZIP Code	To	City State ZIP Code	To Same as Debtor
	State ZIP Code	To	City State ZIP Code Same as Debtor 1	To Same as Debtor From
	State ZIP Code	To	City State ZIP Code Same as Debtor 1	To Same as Debtor From To
	ent of Fire and accurate a form 107 ent of Fire and accurate a form. Answer evidence Details About current maried arried e last 3 years, has ist all of the place for 1:	ent of Financial Affaire and accurate as possible. If two marris from space is needed, attach a separation). Answer every question. The Details About Your Marital States our current marital status? It dearried The last 3 years, have you lived anywhere ist all of the places you lived in the last 3 years.	ent of Financial Affairs for Indiverse and accurate as possible. If two married people are filing from space is needed, attach a separate sheet to this for two). Answer every question. Inve Details About Your Marital Status and Where Your current marital status? Indicate a last 3 years, have you lived anywhere other than where you list all of the places you lived in the last 3 years. Do not include that it is a last 3 years.	corm 107 ent of Financial Affairs for Individuals Filing for Bankrup e and accurate as possible. If two married people are filing together, both are equally responsible for s f more space is needed, attach a separate sheet to this form. On the top of any additional pages, write y swn). Answer every question. Inve Details About Your Marital Status and Where You Lived Before our current marital status? Indicate the status of the places you lived anywhere other than where you live now? In the places you lived in the last 3 years. Do not include where you live now. Dates Debtor 1 Debtor 2: lived there

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Marcus First Name Morris Debtor 1 Case number (# known)_ Middle Name Last Name

4.	Did you have any income from employment Fill in the total amount of income you received If you are filling a joint case and you have income to the second of	from all jobs and all busi	nesses, including part-ti	me activities.	endar years?
	Yes. Fill in the details.				
		Debtor 1		Debtor 2	
		Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
	From January 1 of current year until the date you filed for bankruptcy:	☐ Wages, commissions, bonuses, tips☐ Operating a business	\$	☐ Wages, commissions, bonuses, tips☐ Operating a business	\$
	For last calendar year: (January 1 to December 31,)	Wages, commissions, bonuses, tips	\$	Wages, commissions, bonuses, tips	\$
	(Salidary 1 to becember 31,	Operating a business		Operating a business	
	For the calendar year before that:	Wages, commissions, bonuses, tips	\$	Wages, commissions, bonuses, tips	¢
	(January 1 to December 31,)	Operating a business	Ψ	Operating a business	9
	unemployment, and other public benefit paym gambling and lottery winnings. If you are filing List each source and the gross income from e No Yes. Fill in the details.	a joint case and you have	income that you receive	ed together, list it only once	
		Debtor 1		Debtor 2	
		Sources of income Describe below.	Gross income from each source (before deductions and exclusions)	Sources of income Describe below.	Gross income from each source (before deductions and exclusions)
	F		¢		_
	From January 1 of current year until the date you filed for bankruptcy:		\$		\$
			\$		Φ
			*		Ψ
	For last calendar year:		\$		\$
	(January 1 to December 31,)				
	YYYY		\$		\$
					•
	For the calendar year before that:		\$		\$
	(January 1 to December 31,)		\$		\$

5.

Case 16-12398

Čity

State

ZIP Code

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Debtor 1

Marcus			Morris
First Name	Middle Name	Last Name	

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Case number (if known)

Part 3:

6.

List Certain Payments You Made Before You Filed for Bankruptcy

		ebtor 1's or Deb		•				
₩ No.	Neit "incl	ther Debtor 1 no urred by an indivi	r Debtor 2 dual primar	has primarily ily for a persor	consumer de nal, family, or h	e bts. Consumer debts al nousehold purpose."	re defined in 11 U.S.C. § 10	1(8) as
	Duri	ng the 90 days b	efore you fi	led for bankrup	otcy, did you p	ay any creditor a total of	\$6,225* or more?	
		No. Go to line 7.						
		total amoun child suppor	t you paid tl t and alimo	nat creditor. Do ny. Also, do no	o not include p ot include payr	ayments for domestic soments to an attorney for	or more payments and the upport obligations, such as this bankruptcy case. after the date of adjustment.	
⊠ Yes	. Deb	tor 1 or Debtor	2 or both h	ave primarily	consumer de	ebts.		
						ay any creditor a total of	\$600 or more?	
	Z	No. Go to line 7.						
		creditor. Do	not include	payments for	domestic supp	\$600 or more and the to oort obligations, such as ey for this bankruptcy ca		
					Dates of payment	Total amount paid	Amount you still owe	Was this payment for
						\$	\$	☐ Mortgage
		Creditor's Name						Car
		Number Street						Credit card
								Loan repayment
			<u> </u>					Suppliers or vendors
		City	State	ZIP Code				Other
						\$	_, \$	☐ Mortgage
		Creditor's Name						☐ Car
		N Steer						Credit card
		Number Street						Loan repayment
								Suppliers or vendors
		0.1		7/10 0				Other
		City	State	ZIP Code				
						\$	\$	☐ Mortgage
		Creditor's Name						Car
		Number Street						Credit card
								Loan repayment
		**************************************		***************************************				☐ Suppliers or vendors
		C4.	Ctato	ZID Codo				Other

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Case number (if known)_

Debtor 1

City

State ZIP Code

ebior i	First Name	Middle Name	Last Name		•••	Case number (ir known)	
Insic corp ager such	ders include your orations of which nt, including one n as child suppor	relatives; any g n you are an offi for a business y	eneral partners; cer, director, pers	relatives of any son in control, o	general partners; p r owner of 20% or	partnerships of whic more of their voting	who was an insider? h you are a general partner; securities; and any managing r domestic support obligations,
Z 1							
 '	Yes. List all payn	nents to an insid	ler.	Dates of payment	Total amount paid	Amount you still owe	Reason for this payment
	Insider's Name			-	\$. \$	
	Number Street						
	City	Sta	ate ZIP Code				
					\$	_ \$	
	Insider's Name						
	Number Street						
	City	Sta	ate ZIP Code	-			
an ii	nsider?		eankruptcy, did y		payments or trans	fer any property o	n account of a debt that benefite
2			-				
				Dates of payment	Total amount paid	Amount you still owe	Reason for this payment include creditor's name
	Insider's Name			-	\$	\$	
	Number Street						
	City	Sta	ate ZIP Code				
	Insider's Name				\$	\$	
	Number Street		Vandara andre des en estradon en en en el des en entre de estrador en el estrador en el estrador en el estrador				

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Debtor 1

Marcus			Morris	Case number (if known)
First Name	Middle Name	Last Name	,	

Vithin 1 year before you filed for b ist all such matters, including person nd contract disputes.								
1 No								
Yes. Fill in the details.								
	Nature o	f the c	case	Cou	irt or agency			Status of the case
Case title				Court	Name	-		Pending
				000,				On appeal
				Numb	er Street			Concluded
Case number	 			City		State	ZIP Code	
								Pending
Case title				Court	Name			On appeal
				Numbe	er Street	·····	***************************************	Concluded
Case number								
				City		State	ZIP Code	
theck all that apply and fill in the detance. No. Go to line 11. Yes. Fill in the information below.		ny or y	your proper	ty repossesso	ed, foreclos	sed, garn	ished, attac	hed, seized, or levied?
No. Go to line 11.			your proper		ed, foreclos	sed, garn	ished, attac Date	
No. Go to line 11.					ed, foreclos	sed, garn		
No. Go to line 11. Yes. Fill in the information below.		Desc		erty	ed, foreclos	sed, garn		Value of the property
No. Go to line 11. Yes. Fill in the information below. Creditor's Name		Desc	cribe the prop	perty		sed, garn		Value of the property
No. Go to line 11. Yes. Fill in the information below. Creditor's Name		Desc	cribe the prop lain what hap	erty		sed, garn		Value of the property
No. Go to line 11. Yes. Fill in the information below. Creditor's Name		Expl	cribe the prop lain what hap Property wa Property wa Property wa	pened s repossessed s foreclosed. s garnished.	i.			Value of the property
No. Go to line 11. Yes. Fill in the information below. Creditor's Name	ails below.	Expl	lain what hap Property wa Property wa Property wa Property wa	pened s repossessed s foreclosed. s garnished. s attached, se	i.			Value of the property
No. Go to line 11. Yes. Fill in the information below. Creditor's Name Number Street	ails below.	Expl	cribe the prop lain what hap Property wa Property wa Property wa	pened s repossessed s foreclosed. s garnished. s attached, se	i.			Value of the property
No. Go to line 11. Yes. Fill in the information below. Creditor's Name Number Street City Sta	ails below.	Expl	lain what hap Property wa Property wa Property wa Property wa	pened s repossessed s foreclosed. s garnished. s attached, se	i.		Date	Value of the property
No. Go to line 11. Yes. Fill in the information below. Creditor's Name Number Street	ails below.	Expl	lain what hap Property wa Property wa Property wa Property wa	pened s repossessed s foreclosed. s garnished. s attached, se	i.		Date	Value of the property
No. Go to line 11. Yes. Fill in the information below. Creditor's Name Number Street City Sta	ails below.	Expl	lain what hap Property wa Property wa Property wa Property wa	pened s repossessed s foreclosed. s garnished. s attached, se	i.		Date	Value of the property
No. Go to line 11. Yes. Fill in the information below. Creditor's Name City Star Creditor's Name	ails below.	Expl	lain what hap Property wa Property wa Property wa Property wa Property wa cribe the prop	pened s repossessed s foreclosed. s garnished. s attached, se	i. ized, or levi		Date	Value of the property
No. Go to line 11. Yes. Fill in the information below. Creditor's Name City Star Creditor's Name	ails below.	Expl Desc	lain what hap Property wa Property wa Property wa Property wa cribe the prop	pened s repossessed s foreclosed. s garnished. s attached, se	i. ized, or levi		Date	Value of the property
No. Go to line 11. Yes. Fill in the information below. Creditor's Name City Star Creditor's Name	ails below.	Expl Desc	lain what hap Property wa Property wa Property wa Property wa cribe the prop lain what hap Property wa Property wa Property wa	pened s repossessed s foreclosed. s garnished. s attached, se erty	ł. ized, or levi	ed.	Date	Value of the property

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Marcus Morris Debtor 1 Case number (if known) First Name Middle Name 11. Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from your accounts or refuse to make a payment because you owed a debt? ☑ No Yes. Fill in the details. Describe the action the creditor took Date action Amount was taken Creditor's Name Number Street State ZIP Code Last 4 digits of account number: XXXX-12. Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed receiver, a custodian, or another official? **☑** No ☐ Yes Part 5: **List Certain Gifts and Contributions** 13. Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person? ☑ No Yes. Fill in the details for each gift. Gifts with a total value of more than \$600 Describe the gifts Dates you gave Value per person the gifts Person to Whom You Gave the Gift Number Street ZIP Code State Person's relationship to you Gifts with a total value of more than \$600 Describe the gifts Dates you gave Value per person the gifts Person to Whom You Gave the Gift Number Street

State ZiP Code

Person's relationship to you ____

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	Marcus		Morris	Case number (#known)		va
	First Name Middl	lle Name Last	Name			
. 1854	him 2 years bafara yay	ı, filad fan hankwı		dulla di ana suidh a dadat satu		00 to our obseit 0
		a med for bankrut	otcy, did you give any gifts or cor	itributions with a total valu	e or more man 56	ou to any charity?
	No					
اا	Yes. Fill in the details f	for each gift or conf	tribution.			
	Gifts or contributions t that total more than \$6		Describe what you contributed		Date you contributed	Value
	Ob soitule Manage					\$
	Charity's Name					
	where the first to the shadow that the shadow the shado					\$
	Number Street					
	City State ZIF	P Code				
art 6	List Certain Lo	osses				
	Describe the property y how the loss occurred		Describe any insurance coverage include the amount that insurance had been also as a factor of the state of t	as paid. List pending insurance	Date of your loss	Value of property
			claims on line 33 of Schedule A/B: P	торепу.		lost
			claims on line 33 of Schedule PVB: F	торепу.		
			claims on line 33 of Schedule A/B: F	торену.		lost
art 7	List Certain Pa	yments or Tran		торену.		lost
Wit you Incl	hin 1 year before you consulted about see ude any attorneys, ban	filed for bankrupt		j on your behalf pay or tran n?		lost
i. Wit. you Incl	hin 1 year before you consulted about see ude any attorneys, ban	filed for bankrupt	sfers tcy, did you or anyone else acting or preparing a bankruptcy petition eparers, or credit counseling agenci	on your behalf pay or tran n? es for services required in yo		lost
Wit you Incl	hin 1 year before you I consulted about see ude any attorneys, ban No	filed for bankrupt	sfers tcy, did you or anyone else acting or preparing a bankruptcy petition	on your behalf pay or tran n? es for services required in yo		\$to anyone
Wit you Incl	hin 1 year before you a consulted about seed ude any attorneys, bandon No	filed for bankrupt	sfers tcy, did you or anyone else acting or preparing a bankruptcy petition eparers, or credit counseling agenci	on your behalf pay or tran n? es for services required in yo	our bankruptcy. Date payment or transfer was	\$to anyone
i. Wit. you Incl	hin 1 year before you a consulted about see ude any attorneys, ban No Yes. Fill in the details.	filed for bankrupt	sfers tcy, did you or anyone else acting or preparing a bankruptcy petition eparers, or credit counseling agenci	on your behalf pay or tran n? es for services required in yo	our bankruptcy. Date payment or transfer was	\$to anyone
you Incl	hin 1 year before you a consulted about seed ude any attorneys, bandon No Yes. Fill in the details. Person Who Was Paid Number Street	filed for bankrupt	sfers tcy, did you or anyone else acting or preparing a bankruptcy petition eparers, or credit counseling agenci	on your behalf pay or tran n? es for services required in yo	our bankruptcy. Date payment or transfer was	lost \$

Person Who Made the Payment, if Not You

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btor 1	Marcus		Morris	Case number (if known))	
	First Name Middl	e Name Last	Name			
			Description and value of any pro	operty transferred	Date payment or transfer was made	Amount of payment
	Person Who Was Paid					
	Number Street					\$
	number Street					\$
	City	State ZfP Code				
	Email or website address					
	Person Who Made the Paym	ent, it Not You				•
	No Yes. Fill in the details.		Description and value of any pro	perty transferred	Date payment or transfer was	Amount of paym
	Person Who Was Paid		,		made	
	I GISON VVIO VVAS FAIG					_
	Number Street	44-00-00-00-00-00-00-00-00-00-00-00-00-0	•			\$
		**************************************				\$
	City	State ZIP Code	•			
Do r	ide both outright transf oot include gifts and tra	ers and transfers r	business or financial affairs? made as security (such as the grance already listed on this statement Description and value of property transferred	t.	ty or payments received	
	Person Who Received Trans	fer			•	
	Number Street	×				
		·····				
	City	State ZIP Code				
	Person's relationship to y	ou				
	Person Who Received Trans	fer				
	Number Street					
		TVF17/7///// 1016//////////////////////////////				
	City	State ZIP Code				

Person's relationship to you _____

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ebtor 1	Marcus		Morris	Case number (# kr	10Wn)	
	First Name	Middle Name La	st Name			
19. Wit l	nin 10 years bef	ore you filed for bank	uptcy, did you transfer any prope	ty to a self-settled tru	st or similar device of v	vhich you
		(These are often called	asset-protection devices.)			
Ø						
U.	Yes. Fill in the de	etails.				
			Description and value of the prope	erty transferred		Date transfer
				,		was made
1	Name of trust	· · · · · · · · · · · · · · · · · · ·	_			
-			*** *********************************			
art 8	List Certain	n Financial Accoun	ts, Instruments, Safe Deposit	Boxes, and Storag	e Units	
J. VVIU Clos	ini i year belon ied. sold. movel	e you med for bankrup d, or transferred?	tcy, were any financial accounts o	or instruments held in	your name, or for your	benefit,
		•	t, or other financial accounts; cert	ificates of deposit: sh	ares in banks, credit ur	ions
brol	cerage houses,	pension funds, coope	ratives, associations, and other fi	nancial institutions.	aroo iii baiino, oroait ar	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
2	No					
U 1	res. Fill in the d	letails.				
			Last 4 digits of account number	Type of account or	Date account was	Last balance before
				instrument	closed, sold, moved, or transferred	closing or transfer
			_		or diamonation	
	Name of Financial I	nstitution	XXXX	Checking		\$
	Number Street		-	☐ Savings	THE THE SECTION OF TH	T
	**			☐ Money market		
			-	☐ Brokerage		
	City	State ZIP Code	•	Other		
			. XXXX-	Checking		\$
	Name of Financial Ir	nstitution		Savings		3
	Number Street		•	Money market		
	Mulliper Street			Brokerage		
			•	-		
	City	State ZIP Code		Other		
Day						
secu	ou now nave, o rities. cash. or	r did you nave within other valuables?	I year before you filed for bankrup	tcy, any safe deposit l	box or other depository	for
₩ N						
□ Y	es. Fill in the d	etails.				
			Who else had access to it?	Describe the	e contents	Do you still
						have it?
						☐ No
	Name of Financial In	stitution	Name			Yes
	Number Street		Number Street	····		
•						
			City State ZIP Code			

City

State ZIP Code

Case 16-12398 Doc 1 Filed 04/12/16 Entered 04/12/16 11:51:45 Desc Main Page 52 of 56 Document Marcus Morris Case number (if known) First Name 22. Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy? Yes. Fill in the details. Who else has or had access to it? Describe the contents Do you still have it? ☐ No Name of Storage Facility Name ☐ Yes Number Street Number Street City State ZIP Code City State ZIP Code **Identify Property You Hold or Control for Someone Eise** 23. Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone. ☑ No Yes. Fill in the details. Where is the property? Describe the property Value Owner's Name Number Street Number Street

State Part 10: **Give Details About Environmental Information**

For the purpose of Part 10, the following definitions apply:

Debtor 1

Part 9:

City

Ø

Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material.

State

ZIP Code

Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites.

Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term.

Report all notices, releases, and proceedings that you know about, regardless of when they occurred.

City

ZIP Code

24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law?

No Yes. Fill in the details.			
	Governmental unit	Environmental law, if you know it	Date of notice
Name of site	Governmental unit		
Number Street	Number Street		
	City State ZIP Code		
City State ZIP Code			

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Morris

Marcus

City

ZIP Code

State

Debtor 1

	Marcus	Morris	Case number (if known)	
	First Name Middle Name La:	ast Name		
	you notified any governmental unit	of any release of hazardous materia	1?	
á n				
] Y	es. Fill in the details.			
		Governmental unit	Environmental law, if you know it	Date of notice
		_		
	Name of site	Governmental unit		
	Number Street	Number Street		
		City State ZIP Code		
	City State ZIP Code	_		
ıve	you been a party in any judicial or a	dministrative proceeding under any	environmental law? Include settleme	nts and orders.
ÍN	lo			
ÌΥ	es. Fill in the details.			
		Court or agency	Nature of the case	Status of th case
С	ase title	Maria.		parring
		Court Name		Pending
_	The second secon			On appe
		Number Street		Conclud
c	ase number	City State ZIP Code		
		out in cour		
	A sole proprietor or self-employed A member of a limited liability com A partner in a partnership An officer, director, or managing e	in a trade, profession, or other acti npany (LLC) or limited liability partne executive of a corporation	ership (LLP)	any business?
_	An owner of at least 5% of the voti	ing or equity securities of a corporat	ion	
	o. None of the above applies. Go to F	•		
		Part 12.		
Y	es. Check all that apply above and fil	Part 12. Il in the details below for each busin	ess.	
Y	es. Check all that apply above and fil	Part 12.	Employer Identification	
	es. Check all that apply above and fil	Part 12. Il in the details below for each busin	Employer Identification	
		Part 12. Il in the details below for each busin	Employer Identification Do not include Social	Security number or ITIN.
		Part 12. Il in the details below for each busin Describe the nature of the business -	Employer Identification Do not include Social EIN:	Security number or ITIN.
	Business Name	Part 12. Il in the details below for each busin	Employer Identification Do not include Social	Security number or ITIN.
,	Business Name	Part 12. Il in the details below for each busin Describe the nature of the business -	Employer Identification Do not include Social EIN:	Security number or ITIN.
	Business Name	Part 12. Il in the details below for each busin Describe the nature of the business -	Employer Identification Do not include Social EIN: Dates business existe	Security number or ITIN.
	Business Name Number Street	Part 12. Il in the details below for each busin Describe the nature of the business -	Employer Identification Do not include Social EIN: Dates business existe From T Employer Identification	Security number or ITIN. d n number
	Business Name Number Street	Part 12. Il in the details below for each busin Describe the nature of the business Name of accountant or bookkeeper	Employer Identification Do not include Social EIN: Dates business existe From T Employer Identification	Security number or ITIN.
	Business Name Number Street City State ZIP Code	Part 12. Il in the details below for each busin Describe the nature of the business Name of accountant or bookkeeper	Employer Identification Do not include Social EIN: Dates business existe FromT Employer Identification Do not include Social	Security number or ITIN. ad o n number Security number or ITIN.
	Business Name Number Street City State ZIP Code	Part 12. Il in the details below for each busin Describe the nature of the business Name of accountant or bookkeeper Describe the nature of the business	Employer Identification Do not include Social EIN: Dates business exists From T Employer Identification Do not include Social EIN:	Security number or ITIN. ad o n number Security number or ITIN.
	Business Name Number Street City State ZIP Code Business Name	Part 12. Il in the details below for each busin Describe the nature of the business Name of accountant or bookkeeper	Employer Identification Do not include Social EIN: Dates business existe FromT Employer Identification Do not include Social	Security number or ITIN. ad o n number Security number or ITIN.
	Business Name Number Street City State ZIP Code Business Name	Part 12. Il in the details below for each busin Describe the nature of the business Name of accountant or bookkeeper Describe the nature of the business	Employer Identification Do not include Social EIN: Dates business exists From T Employer Identification Do not include Social EIN:	Security number or ITIN. d n number Security number or ITIN.

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Debtor 1	Marcus		Morris	Case number (f known)
	First Name Mid	idle Name Last Na	nne Describe the nature of the	business	Employer Identification number
	Business Name				Do not include Social Security number or ITIN. EIN:
	Number Street		Name of accountant or bo	okkeeper	Dates business existed
	City	State ZIP Code			From To
			cy, did you give a financi	al statement to anyone abo	out your business? Include all financial
Ø	titutions, creditors, o No Yes. Fill in the detai				
_	163.1 m at the detail	is below.	Date issued		
	Name		MM / DD / YYYY		
	Number Street	***************************************			
	City	State ZIP Code			
Part 1	2: Sign Below				
ar in	swers are true and	correct. I understand ankruptcy case can	I that making a false state		lare under penalty of perjury that the y, or obtaining money or property by fraud up to 20 years, or both.
3	: 4/fa_	Mo	*	e of Debtor 2	
	Signature of Debtor 1 Date $\frac{4}{12} / \frac{2}{16}$	F	-	e of Debtor 2	
Di	<i>i i</i>	nal pages to Your St			r Bankruptcy (Official Form 107)?
	No Yes				
	d you pay or agree to No	o pay someone who	is not an attorney to help	you fill out bankruptcy fo	rms?
		n		Attach	the Bankruptcy Petition Preparer's Notice, ration, and Signature (Official Form 119).

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Fill in this information to identify your case:				
Debtor 1	Marcus First Name	Middle Name	Morris Last Name	
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name	
United States I	Bankruptcy Co	ourt for the: Northern District of Illin	nois	
Case number (If known)				

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

12/15

If you are an individual filing under chapter 7, you must fill out this form if:

- creditors have claims secured by your property, or
- you have leased personal property and the lease has not expired.

You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of creditors, whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list on the form.

If two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form.

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

Part 1: List Your Creditors Who Have Secured Claims

Identify the creditor and the property that is collateral	What do you intend to do with the property that secures a debt?	Did you claim the property as exempt on Schedule C?
Creditor's	☐ Surrender the property.	☐ No
name:	Retain the property and redeem it.	☐ Yes
Description of property securing debt:	Retain the property and enter into a Reaffirmation Agreement.	
Q	Retain the property and [explain]:	
Creditor's	☐ Surrender the property.	□ No
name:	Retain the property and redeem it.	Yes
Description of property securing debt:	Retain the property and enter into a Reaffirmation Agreement.	
	Retain the property and [explain]:	
Creditor's	☐ Surrender the property.	□ No
name:	Retain the property and redeem it.	Yes
Description of property securing debt:	Retain the property and enter into a Reaffirmation Agreement.	
·	Retain the property and [explain]:	
Creditor's	☐ Surrender the property.	□ No
name:	Retain the property and redeem it.	☐ Yes
Description of property securing debt:	Retain the property and enter into a Reaffirmation Agreement.	
-	Retain the property and [explain]:	

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Desc Main

Debtor 1

Marcus

First Name

Date 4 /17/16 MM / DD / YYYY

Middle Name Last Name Morris

Case number (If known)_

Part 2:

List Your Unexpired Personal Property Leases

For any unexpired personal property lease that you listed in Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G), fill in the information below. Do not list real estate leases. Unexpired leases are leases that are still in effect; the lease period has not yet

Describe your unexpired personal property leases	Will the lease be assumed
essor's name:	□ No
escription of leased	☐ Yes
roperty:	
essor's name:	☐ No
	Yes
escription of leased roperty:	
essor's name:	□ No
escription of leased	☐ Yes
roperty:	
essor's name:	☐ No
	☐ Yes
escription of leased roperty:	
essor's name:	□ No
	☐ Yes
escription of leased roperty:	
essor's name:	□ No
	☐ Yes
escription of leased roperty:	
essor's name:	☐ No
	☐ Yes
escription of leased roperty:	
escription of leased roperty:	☐ Yes

Date MM / DD / YYYY